

***United States Court of Appeals
for the Second Circuit***



APPENDIX

Orig w/ affidavit of mailing

75-1354

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P/S*

**United States Court of Appeals
FOR THE SECOND CIRCUIT**

Docket No. 75-1354

UNITED STATES OF AMERICA,

Appellee,

—against—

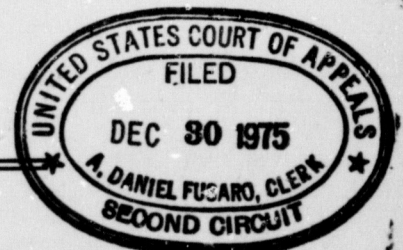
ALFONSO PINEROS,

Appellant.

ON APPEAL FROM THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF NEW YORK

GOVERNMENT'S APPENDIX

DAVID G. TRAGER,
*United States Attorney,
Eastern District of New York*



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TABLE OF CONTENTS

	PAGE
Letter dated January 7, 1975 from defense counsel to Assistant United States Attorney	A-1
Psychiatric report of Dr. Norman Weiss (dated March 1, 1975)	A-3
Pre-trial conference dated March 14, 1975	A-5
Pre-trial conference dated April 29, 1975	A-13
Pre-trial conference dated July 21, 1975	A-24
Excerpt from trial testimony (testimony of Doc- tors Mario Rendon and David Abrahamsen)	A-37
Government Exhibit 27	A-161
Government Exhibit 28	A-174

741-36
Levin Epstein
A 1

January 7, 1975

Ethan Levin-Epstein, Esq.
Assistant United States Attorney
Eastern District of New York
225 Cadman Plaza East
Brooklyn, New York

Re: ALPHONSO PINEROS
a/k/a GILBERTO AMAYA

Dear Mr. Levin-Epstein;

In order to avoid the unnecessary bringing of motions for discovery and particulars and to comply with Rule 3 of the Criminal Rules of the United States District Courts for the Southern and Eastern District of New York, which require an attempt by counsel to resolve matters of discovery and particulars in advance of motions, I would request answers to the following questions concerning the above captioned case.

1. Any statement made by the defendant (Alphonso Pineros), whether oral or written in the possession of the government, dealing with the facts of this case.
2. Whether any property, drugs or money was seized from the defendant, (Alphonso Pineros), his home or an area under his control that the government intends to offer into evidence against him or which served as a lead to evidence against him.
3. If any property, drugs or money was seized, describe the property, drugs and the time and place of seizure.
4. Whether the government intends to connect the defendant to the crime alleged in this indictment by the use of any expert or scientific evidence, including laboratory reports.
5. If the answer to the previous question is "yes" please make a copy of any report available to my office.
6. Whether the defendant was the subject of electronic surveillance of any sort. If yes, please explain (i.e. wiretap, helset, bug etc.) If any conversation of any of the defendants were tapped or bugged or recorded in any way please advise counsel and provide an opportunity for counsel to hear the tapes.
7. Provide counsel with any information in the possession of the government which may tend to exonerate the defendant.
8. Provide counsel with a photocopy of the defendant's criminal record.
9. Provide counsel with a photocopy of the criminal record, if one exists, for any witness the government intends to call.
10. Have any search warrants, arrest warrants or eavesdropping warrants been issued in this case. If so, could we have a copy of the warrant and any supporting affidavits.

11. Whether any statements were made by co-defendants which tend to inculcate (Alphonso Pineros).

12. Whether it is alleged that any drugs were actually transferred or exchanged by the defendant at any time. Specify defendant's participation in the alleged transfers.

13. State the date and time when and place where the alleged transfers took place.

14. State whether it is alleged that the defendant was present at the time when and place where the transfers took place.

15. State the name of the person or persons to whom the alleged transfers were made.

16. Whether any marked or "bait" money was exchanged for the drugs.

17. If the answer to the above question is "yes" state whether any of the marked or "bait" money was allegedly found in the possession of the defendant or any defendant in this case.

Very truly yours,

Barry Krinsky

BARRY KRINSKY
Attorney

BK:RK

NORMAN WEISS, M. D.
50 EAST 78TH STREET
NEW YORK, N. Y. 10021
TELEPHONE: 861-8168

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March 1, 1975

Barry Krinsky, Esq.
66 Court Street
Room 500
Brooklyn, New York 11201

RE: ALPHONSO PINEROS

Dear Mr. Krinsky:

As per your request, I examined your client at the U.S. District Courthouse, Eastern District of New York, on February 28, 1975. I interviewed him with the aid of a Spanish translator. In addition to my interview, information made available to me included a transcript of a conversation between Mr. Pineros and a special agent, dated about the time of his alleged offense, towards the end of 1974. I also read psychiatric reports from Kings County Hospital in Brooklyn, Dr. Daniel Schwartz and a series of reports from the Medical Center for Federal Prisoners, Springfield, Missouri, ranging between February 1974 and November 1974. The purpose of this psychiatric examination was to determine Mr. Pineros' competency at the present time to understand the charges against him and to participate in his defense, and secondly, an evaluation of his mental status at the time of the alleged defense. In other words, to evaluate his mental irresponsibility at that time.

During the course of my interview, Mr. Pineros was essentially cooperative and appropriate. He showed to me a medical report that originated in a hospital in Bogota, Columbia, indicating that he had sustained head injuries in 1971. The significant statement of the report indicated "there is no post traumatic syndrome". Mr. Pineros, when questioned about the events of the last two months of 1974, said that he was told that he sold cocaine to federal agents. He said that he does not know this, since his memory was not intact at that time. At the time of this examination, there was no indication of memory deficit for either recent or remote events, nor was there any evidence of psychotic disorder, characterized by either delusions or hallucinations. This is in contrast to the psychiatric report from Kings County Hospital Center, that described an actively psychotic individual with religious and grandiose delusions. Yet, the transcript that I read of conversations between himself and a special agent, around the time of the alleged offense, did

not demonstrate any of the thinking disorder that was described after the alleged crime in Kings County Hospital. I could gather from the report to the extent that I was able to follow it, that no active delusional system was present, no inappropriateness worthy of note was evidenced, and that Mr. Pineros was responsive to questions and comments made by this special agent, strongly suggesting that no active psychotic process was present at that time. Mr. Pineros has denied a history of epilepsy, and though he states that he has had memory difficulties since a "mugging" experience at the end of 1972, there is no evidence to indicate that this was ever worked up in any medical setting.

Mr. Pineros was given a psychotic diagnosis based on his behavior and mental disorganization while at Kings County Hospital. He states that he has been periodically hospitalized in the past. He may, in fact, based on this history, be a psychotic individual who periodically becomes more floridly psychotic and then improves. Based on the evidence available to me around the time of the alleged offense in November or December of 1973, I see no psychiatric evidence to indicate that Mr. Pineros was not mentally responsible at the time. I also find at the present time that he is mentally competent to stand trial. He indicated to me that he knew his attorney was familiar with the role of judge and jury and knew generally of the functions of various parts of the court. He also knew the charge against him.

If I can be of further help in this matter, please do not hesitate to call me.

Very truly yours,

Norman Weiss, M.D.
Diplomate in Psychiatry

NW/db

1 UNITED STATES DISTRICT COURT
2 EASTERN DISTRICT OF NEW YORK

A 5

3 -----X
4 UNITED STATES OF AMERICA, :
5 -against- :
6 ALFONSO PINEROS, :
7 Defendant. :

74-CR-47

8 -----X
9
10 United States Courthouse
11 Brooklyn, New York

12 March 14, 1975
13 10:00 o'clock A.M.

14 B e f o r e :

15 HONORABLE MARK A. COSTANTINO, U.S.D.J.
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21 ILENE GINSBERG
22 OFFICIAL COURT REPORTER
23
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2 Appearances:

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4 DAVID G. TRAGER, ESQ.
5 United States Attorney
for the Eastern District of New York

6 BY: LTHAN LEVIN-EPSTEIN, ESQ.
7 Assistant U.S. Attorney

8 BARRY KRINSKY, ESQ.
9 Attorney for Defendant
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2 THE CLERK: Criminal hearing, U.S.A. v.
3 Alfonso Pineros.

4 (Emile C. Rodriguez, the Interpreter, was duly
5 sworn by the Clerk of the Court.)

6 MR. LEVIN-EPSTEIN: Your Honor, at this time
7 you will note from the calendar matters before you
8 ostensibly for a criminal hearing.

9 The hearing planned at the previous appearance
10 was that at this time the Court would preside at a
11 hearing as to the defendant's competency to stand
12 trial having been examined on numerous occasions by both
13 Government psychiatrists at Springfield, Missouri and
14 Kings County Medical Center and in addition, having
15 been examined by Dr. Norman Weiss on behalf of the
16 defendant himself.

17 The result of the examinations pursuant to the
18 Court's order, I expect, have been sent to the Court
19 but for the record, let me indicate briefly that the
20 examination ultimately of the Government psychiatrist
21 indicates that Mr. Pineros is both competent to stand
22 trial and knows no mental deficiency or disease that
23 would limit his responsibility at the time of the
24 alleged crimes.

25 Mr. Krinsky has shown me a report of

1 Dr. Norman Weiss which is basically consistent with the
2 report of Dr. Andolayer and Dr. Snow at Springfield.

3 I move the Court under Section 4244 of Title 18
4 to accept the reports of Dr. Andolayer and Dr. Snow
5 that the defendant is competent to stand trial, should
6 that be the case.

7 MR. KRINSKY: I have a copy of Dr. Schwartz'
8 report supplied to me by the U.S. Attorney's Office.

9 My doctor's report having been received a day
10 or so ago I have had no opportunity to make copies but
11 I will pass it up to the Court and we will submit copies
12 to the Court and the United States Attorney.

13 MR. LEVIN-EPSTEIN: Your Honor, I can indicate
14 to you there is another report from Dr. Dimasou Snow
15 and if the Court wants I can supply your chambers with
16 a copy of that report as well although I believe
17 Dr. Snow sent one to you directly.

18 MR. KRINSKY: A copy of that report was
19 turned over to me as well, your Honor, by Mr. Levin-
20 Epstein.

21 THE COURT: All right.

22 Based upon the report of Kings County --

23 MR. KRINSKY: Before your Honor does that, so
24 the record is completely clear on this issue, after I
25 received all of the reports from Springfield, Missouri

1 and receiving Dr. Schwartz' report I, pursuant to court
2 order, had my own psychiatrist, Dr. Weiss, examine
3 Mr. Pineros in the court building. A copy of that
4 report is now before the Court.

5 In addition to that report, I personally spoke
6 to Dr. Weiss on the telephone on several occasions
7 subsequent to his interview with Mr. Pineros.

8 He advised me that in his considered judgment
9 the report the Court has clearly reflects that
10 Mr. Pineros is competent to stand trial.

11 In addition to interviewing Mr. Pineros I
12 provided him with all of the FBI report transcripts
13 relating to conversations supposedly between Mr. Pineros
14 and the agents during the course of time these events
15 were supposed to have occurred.

16 I also spoke to Dr. Weiss about the possibility
17 or feasibility of having another psychiatrist look at
18 Mr. Pineros before a judgment was made as to his
19 competency. He advised me that in certain cases he
20 would so advise but in his considered judgment, based
21 on all the facts of the case, that in this case it
22 wasn't an ambiguous situation and he saw no reason to
23 get another psychiatrist and that he felt that
24 Mr. Pineros was competent to stand trial.

25 In light of all that psychiatric testimony it

1 seems that defense counsel would be in almost an
2 insuperable position to overcome that weight of
3 psychiatric testimony and I see no alternative but to
4 accept the determination of the psychiatrists except to
5 recall for the Court that Mr. Pincus advised me that he
6 does not recall the events of 1973.

7 MR. LEVIN-EPSTEIN: With respect to the amnesia,
8 what is an alleged historical amnesia, I can represent
9 to the Court that an amnesia per se, be it hysterical,
10 traumatic, physiological or otherwise, is not grounds
11 to justify a ruling of incompetency to stand trial nor
12 is it a justifiable mental disease or defect as used in
13 the text to be a ground for lack of responsibility at
14 the time of the crimes alleged.

15 The Government would renew its motion that the
16 defendant be adjudged competent to stand trial at this
17 time.

18 THE COURT: Upon the statement of the
19 psychiatrist and the statements made to the Court the
20 Court finds the defendant competent to stand trial.

21 MR. KRINSKY: I am on trial in a class A felony
22 over in Brooklyn Supreme Court.

23 I discussed with Mr. Levin-Epstein the
24 possibility of some alternative disposition of this
25 matter which is currently under conversation between

myself and Mr. Levin-Epstein.

A 11

I would suggest to the Court if at all possible to set this down for a date either one or two weeks from today to advise the Court whether disposition is possible or whether or not we actually have to go through with a trial.

THE COURT: We will put it down for March 21.

MR. LEVIN-EPSTEIN: For status report and the setting of a trial date?

THE COURT: Yes.

MR. LEVIN-EPSTEIN: Thank you.

MR. KRINSKY: Thank you.

THE COURT: The Court instructs the Government to see whether or not there is a doctor in the premises to determine whether this incident occurred because of illness.

MR. LEVIN-EPSTEIN: So the record be complete --

THE COURT: You say nothing.

MR. LEVIN-EPSTEIN: If your Honor would describe for the record --

THE COURT: As the defendant was being led out of the courtroom the defendant took an apparent fall, struck his head against the base of the jury box and then had an apparent type of a fit which the Court does not diagnose nor would it presume to diagnose at this

time.

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MR. LEVIN-EPSTEIN: I will take appropriate
action to contact the medical facilities.

THE COURT: Right away, right away.

* * *

1 UNITED STATES DISTRICT COURT
2 EASTERN DISTRICT OF NEW YORK

A 13

3 -----x
4 UNITED STATES OF AMERICA :

5 -against- :

74 CR 47

6 ALFONSO PINEROS, :

7 Defendant :
8 -----x

9
10 United States Courthouse
Brooklyn, New York

11 April 29, 1975
12 10:00 o'clock a.m.
13
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15

16 B e f o r e :

17 HONORABLE MARK A. COSTANTINO, U.S.D.J.
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23 HENRI LeGENDRE
24 ACTING OFFICIAL COURT REPORTER
25

A 14

Appearances:

DAVID G. TRAGER, ESQ.
United States Attorney
for the Eastern District of New York

BY: F. LEVIN-EPSTEIN, ESQ.
Assistant United States Attorney

BARRY KRINSKY, ESQ.
Attorney for the Defendant

THE CLERK: Criminal cause for all purposes,
USA versus Alfonso Pinerros.

MR. LEVIN-EPSTEIN: Mrs. Menza is coming down,
she had to run back upstairs.

MR. KRINSKY: I want to advise the Court of
the circumstances. I make this application I'm going
to make today, I make it after considerable thought.

I appeared before your Honor on many occasions,
as the Court well knows. This particular case has
been a very difficult one as the Court has been
aware concerning this particular defendant, having
had numerable conversations with this defendant as
well as having had complete disclosure on the part
of the Government in terms of their entire file. In
terms of what the evidence is, factually, having our
own psychiatrist examine Mr. Pinerros, having him
review all of the transcripts of our tape recorded
conversations of Mr. Pinerros as well as all of the
reports the Federal agents turned over to the
psychiatrist as well.

After reviewing the entire file, I made
certain recommendations as to how I think this case
should proceed. My last conversation with him for
several hours led me to believe that he was going to
heed my advice, then I advised Mr. Levin-Epstein of

4
1 the situation and the case was put on. A 16

2 THE COURT: You want to bring him out?

3 (At this point Marguarita Mensa was sworn in
4 by the Clerk of the Court as an official court
5 interpreter now standing before the Court assisting
6 the defendant Alfonso Pineros.)

7 MR. LEVIN-EPSTEIN: The last time I delivered
8 to your chambers a memorandum of law, a copy also
9 has been supplied to counsel.

10 MR. KRINSKY: Your Honor, as I was indicating, I have
11 completely reviewed the case. My last conversation
12 with Mr. Pineros for several hours over at the
13 Federal House of Detention, with the aid of an
14 interpreter, I was led to believe that Mr. Pineros
15 was going to heed my advice how to proceed. The case
16 was adjourned until today's date and Mr. Levin-Epstein
17 was advised as to what the situation was, and has in
18 good faith, and at some inconvenience to himself,
19 prepared a memorandum of law, and so I apologize to
20 him, because I have an application to make at this
21 time which may indicate that his work was somewhat
22 done in vain. I've discussed the matter again with
23 Mr. Pineros. I appreciate the Court's consideration
24 to allow me the time to speak to Mr. Pineros with the
25 aid of a Spanish interpreter.

Despite my innumerable conversations with the defendant, reviewing all the factors that I brought to the Court's attention, Mr. Pineros and I have reached an irreconcilable roadblock. I have given him my advice based upon my considered facts and circumstances of this case, and I have in addition asked Mr. Levin-Epstein to be kind enough on previous occasions to reinterview the Federal agents who Mr. Pineros was involved in for a period of six weeks, during November, December of 1973 and January of 1974; to reinterview them on the question of whether or not there was any sign of strange behavior, mental behavior during that period of time. He reported back to me --

MR. LEVIN-EPSTEIN: I may add Special Agent Kobell (phonetic) was involved in those investigations.

MR. KRINSKY: It was my considered judgment, your Honor, that the advice I gave Mr. Pineros was and is in his best interest based upon my conversation with him and the facts that I've gotten from my conversation, which I cannot disclose, because they are private, I cannot in good conscience proceed with the line of defense which Mr. Pineros is now urging me to proceed with.

I make this application therefore to be

1 relieved as Mr. Pineros' counsel. I make the
2 application not lightly, I have the highest respect
3 for this Court and would not make this application
4 unless I felt in all good conscience that perhaps at
5 this moment in time, it was in Mr. Pineros' best
6 interest. In light of our inability to communicate
7 after having a year of representation, and going over
8 this case, God knows how many times, perhaps new
9 counsel should be assigned and I be relieved of
10 representation.

11 I apologize to the Court, if there is any
12 inconvenience to the Court. I apologize to
13 Mr. Levin-Epstein. I advised him in good faith, what
14 I believed was going to occur, but it's Mr. Pineros'
15 desire, he wishes to proceed differently than I
16 advise him, that is his right, and I do not wish to
17 infringe upon that right in any way except indicate
18 that it may not be in his best interest for me to
19 continue as his counsel; so I respectfully request
20 that I be relieved of representation of Mr. Pineros.

21 THE COURT: It's your considered opinion after
22 your conversation with Mr. Pineros, it would be
23 impossible for you to make a defense to a jury in
24 accordance with his ideas as to how you should
25 proceed.

1 MR. KRINSKY: That is my considered judgment.

2 It would be completely against my advice, my
3 own experience and what I consider to be in the best
4 interest of Mr. Pineros.

5 THE COURT: You feel you would be doing
6 justice to him?

7 MR. KRINSKY: That is my considered feeling
8 and I've given it careful thought. I ask the Court
9 to consider the application.

10 THE COURT: I must say, Mr. Krinsky, you have
11 been in my Court many times and the Court likewise
12 has appointed you, likewise, to represent defendants,
13 and each time you have exercised a great deal of
14 diligence in representing defendants, and you also
15 have represented them with the interest of the party
16 to whom you have been assigned. I find no reason, if
17 you decide you should withdraw from a case that I
18 should be the one to insist that you continue to
19 represent a man when you know, as an attorney with
20 an excellent reputation, and full of dignity and
21 decorum -- therefore under the conditions, knowing
22 the length that this case has been before the Court,
23 tremendous amount of work you have exerted and also
24 on behalf of the defendant, likewise in your
25 consultation with the U.S. Attorney in attempting to

1 arrive at some disposition without the assistance of
2 the Court, since the Court cannot partake in any of
3 those dispositions, I think for the interest of all
4 concerned, the Government, the defendant and the Court,
5 I should relieve you of your obligation at this time
6 in representing this defendant.

7 The Court will appoint a new lawyer for him.

8 MR. KRINSKY: I also say for the record, any
9 new lawyer who is in fact assigned, I will stand
10 ready to give copies of my entire file and will feel
11 free to consult with him and tell him anything that
12 could be of any help to any new attorney, anything
13 that could be of any help to Mr. Pineros.

14 THE COURT: I ask you one question. Did you
15 discuss with him the memorandum submitted by
16 Mr. Levin-Epstein in reference to the type of proof
17 that would be submitted to the Court to indicate the
18 guilt -- his guilt in the proceeding.

19 MR. KRINSKY: That was the reason for the
20 lengthy delay in calling this case this morning. I
21 was going over it from every possible angle to try
22 and explain to the defendant what exactly was
23 involved. It would not involve any admission of
24 guilt. It would be a finding of guilt based on the
25 evidence and not through the mouth of the defendant,

who said he does not remember these events. After a lengthy conversation attacking that problem from every single possible angle that I could think of that I've given careful thought to --

THE COURT: You gave a conclusion that he did not understand?

MR. KRINSKY: I got the impression that he understood what was involved but that he did not wish to proceed in the fashion which I advised.

MR. LEVIN-EPSTEIN: May I add at this point, if it please the Court, if it may be of some service to Mr. Pineros, I stress this may be an advantage to the defendant in light of the advice announced by counsel.

The Government is prepared at this time, physically prepared with the videotapes and the tape recordings that were made alleged in the indictment if the Court feels it would be of any salutary value to the defendant and to the United States in terms of disposition.

THE COURT: I was going to ask that question, whether the defendant has ever been exhibited any --

MR. KRINSKY: He has read the transcript.

THE COURT: I'm relieving you, but as his previous attorney, did you ever advise him that he

1 had a right to see those tapes?

2 MR. KRINSKY: Yes.

A 22

3 THE COURT: What was his response?

4 MR. KRINSKY: We went over the transcripts
5 which are the transcripts of the actual recordings,
6 the conversations which were transcribed and briefly
7 advised Mr. Pineros they would be a videotape showing,
8 to be arranged in the courtroom through the auspices
9 of the U.S. Attorney's Office, to show him on videotape.

10 Mr. Pineros said he would like to see it. My
11 problem at this point is, Judge, in light of the
12 posture of the situation at this point, I don't want
13 it to seem in any way, shape or form --

14 THE COURT: I agree with you.

15 MR. KRINSKY: Even if he saw it.

16 THE COURT: Better procedure that we should
17 appoint someone new.

18 I must advise you that he cannot speak to the
19 Court because any statements that he makes, since
20 he's no longer represented by counsel may be
21 detrimental to him, since it's being placed on the
22 record. I would rather he make no statement and
23 that the Court will appoint a new counsel and he can
24 tell his new lawyer anything he desires.

25 OFFICIAL COURT INTERPRETER: Okay.

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1 MR. LEVIN-EPSTEIN: I'll point out for the
2 record a new attorney contemplated will be Mr. Pineros'
3 third lawyer.

4 THE COURT: They say he's entitled to be
5 represented, especially this type defendant, he would
6 have to be.

7 MR. LEVIN-EPSTEIN: May I ask that the matter
8 be adjourned for calendar control purposes.

9 THE COURT: Let's put it off until around
10 May, May 23rd.

11 MR. LEVIN-EPSTEIN: Whatever pleases the
12 Court.

13 THE COURT: We'll put it on for a Thursday
14 morning, May 29th, 10:00 o'clock. That may be moved
15 up or back. That's for all purposes.

16 MR. LEVIN-EPSTEIN: 5/29, 10:00 a.m.

17 THE COURT: You may submit your voucher with
18 the amount of work you performed. I thank you, I know
19 you did a good job.

20 MR. KRINSKY: Thank you, your Honor.

21 THE COURT: All right, recess.

22 (Whereupon the Court stood in recess on this
23 matter for the day.)

24 * * *

25

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

-----X

UNITED STATES OF AMERICA, :
-against- : 74-CR-47
ALFONSO PINEROS, :
Defendant. :

-----X

United States Courthouse
Brooklyn, New York

July 21, 1975
10:00 A.M.

B e f o r e :

HONORABLE MARK A. COSTANTINO, U.S.D.J.

HENRI LEGENDRE
ACTING OFFICIAL COURT REPORTER

Appearances:

DAVID G. TRAGER, ESQ.
United States Attorney
for the Eastern District of New York

BY: ETHAN LEVIN-EPSTEIN, ESQ.
Assistant U.S. Attorney

IRA LEITEL, ESQ.
Attorney for Defendant

1 THE CLERK: Criminal cause for trial, United
2 States of America v. Alfonso Pineros.

3 THE COURT: Good morning.

4 MR. LEITEL: Good morning. Defendant is
5 ready to proceed to trial.

6 THE COURT: Ready?

7 MR. LEVIN-EPSTEIN: The Government is ready;
8 however, the Government has just been informed outside
9 the presence of the Court that the defendant has
10 prepared a psychiatric examination or has had a
11 psychiatric examination of the defendant done.

12 Can we wait until after the defendant is out and
13 the interpreter can interpret what I have to say?

14 THE COURT: All right.

15 (Whereupon, official court interpreter present
16 and defendant present in open court)

17 MR. LEVIN-EPSTEIN: I began to say that the
18 Government has been informed outside the presence of
19 the Court this morning, that counsel for the defendant
20 has obtained a doctor, apparently Dr. Mario Renden who
21 has examined the defendant with respect to the issues,
22 specifically with responsibility. The defendant has
23 been examined numerous times. In light of this
24 announced psychiatric examination with respect to
25 responsibility, the Government would request an

1 opportunity to have its own doctors examine the
2 defendant as to the issue of responsibility.

3 THE COURT: Well, I think all the other medical
4 reports indicate both, practically speaking.

5 MR. LEVIN-EPSTEIN: Unfortunately, I would
6 agree with you - personally, the law requires that
7 there be two.

8 THE COURT: Are you talking about criminal
9 responsibility at the time he committed the act of
10 the sales or the accusations of the sales, or the time
11 they took his picture, and that kind of thing?

12 MR. LEVIN-EPSTEIN: The Government has never
13 examined him as to that matter; and the defense of
14 insanity, your Honor is aware, requires that the
15 Government be given ample opportunity to rebut that.
16 We couldn't do so without an examination.

17 THE COURT: Did you receive the report of your
18 doctor?

19 MR. LEITEL: I have not. As you might recall,
20 on Friday by telephone, we requested permission, I did
21 a lot of hustling to find the psychiatrist. I did.
22 I was lucky enough to get a psychiatrist who is of
23 Hispanic extraction, what he was looking for. He
24 could speak to the defendant directly in his own
25 language, understand him. I brought the psychiatrist

1 to West St., we arranged it there. On Saturday we had
2 a long interview, I had made copies of all the
3 transcripts in my possession so he could study all that.
4 I suspect the doctor will testify for the defendant
5 with regard to responsibility, and I am not sure yet
6 whether I'll have a written report of the doctor, in
7 that this is such a recent event. By bringing in a
8 psychiatrist we didn't know whether we were going to
9 try all of this at the very last moment. I am some-
10 what surprised that the Government has never secured
11 a psychiatrist to examine this man with regard to
12 responsibility -- there is case law.

13 Where there is competency to stand trial the
14 burden shifts to the Government to prove his
15 responsibility.

16 THE COURT: Only if that becomes an issue. I
17 have just been through all of that. I just went
18 through a four-week trial regarding criminal
19 responsibility.

20 MR. LEITEL: It's been the issue in this case
21 and always has been.

22 THE COURT: I don't think it's ever been an
23 issue that he understood the nature of the act at the
24 time that he committed the crime, the potential sale.
25 There is a question whether he was competent to stand

1 trial after his arrest, and that's what we have been
2 doing. We sent him to Springfield. There was no
3 question at any time that he didn't understand the
4 nature of the act at the time --

5 MR. LEITEL: He was sent first to Kings County,
6 then Springfield immediately after being arrested;
7 at that time there was a finding.

8 THE COURT: Just to see whether he was competent.

9 MR. LEITEL: That he was mentally ill.

10 THE COURT: He could be competent long before
11 not at the time of the act.

12 MR. LEITEL: I would like to cite to your Honor
13 Traveston v. United States, 418, 1043, Cert. denied,
14 397 United States 935, wherein it was held that where
15 there has been an adjudication of competency prior to
16 trial, the Government has the burden to prove legal
17 sanity beyond a reasonable doubt. There has been only
18 a question of competency where that is, so the law
19 provides that there is sufficient issue to prove
20 sanity.

21 THE COURT: But you can't foreclose from him
22 having an examination determining criminal responsibility
23 at the time of the act.

24 MR. LEITEL: Of course.

25 MR. LEVIN-EPSTEIN: May I ask what Circuit?

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1 MR. LEITEL: I know it was 1969.

2 MR. LEVIN-EPSTEIN: May I point out for the
3 record, United States v. Currier, 405 F. 2d, 1039,
4 1969 decision of the Second Circuit of the United
5 States. It was held until the issue of criminal
6 responsibility is raised sufficiently at trial --

7 THE COURT: That's the one we followed in the
8 Hendrix case. That's exactly the one we followed in
9 the Hendrix case.

10 MR. LEVIN-EPSTEIN: I would also --

11 THE COURT: They gave the Government an
12 opportunity before the trial to have their doctor
13 examine him, so the day of trial everyone would be
14 ready, but that was done two months before, so there
15 was no question that that would be the issue before
16 the trial.

17 MR. LEVIN-EPSTEIN: The case of United States
18 v. Spinard cited at 438 F. 2d, 717, a 1971 decision
19 of the Second Circuit also supports the position of
20 the Government, it's entitled to know at least
21 implicitly prior to the time the defense is inter-
22 posed, what the defense would be, and an opportunity
23 to provide rebuttal to that defense.

24 THE COURT: In any event, all these rules are
25 eventually going to be modified.

1 MR. LEVIN-EPSTEIN: Under the federal rules that
2 are to be adopted.

3 THE COURT: That's what I was going to say.
4 Sufficient time like under the state law where an
5 alibi must be given ten or fifteen days, which is the
6 proper thing. It's improper for a defendant to come
7 in the day of trial and say this is our defense; it's
8 a two-way street.

9 MR. LEITEL: Let me just correct that factually.
10 As you know, we have been in continual negotiations
11 with respect to a resolution of this other than trial.
12 Those conversations --

13 THE COURT: I don't think that I could accept a
14 plea from this defendant because of a history. I
15 would rather have twelve jurors come in.

16 MR. LEITEL: With regard to when notice was
17 explicitly given to the Government -- negotiations
18 broke down last Thursday. At that time there was a
19 meeting with Mr. Levin-Epstein in his office, and at
20 that time it was made clear that we were going to trial
21 and that the issue in the defense would be lack of
22 responsibility.

23 THE COURT: I know that we are all hooked up.

24 MR. LEVIN-EPSTEIN: We could unhook as quickly
25 as hook.

1 THE COURT: I don't know the next time I can
2 try this. This week is the last week, and I think
3 there is something on for next Monday.

4 MR. LEITEL: Well, you know, your Honor, how
5 long this man has been in jail.

6 THE COURT: He has problems and defenses. He
7 is entitled to everyone of them.

8 MR. LEITEL: The defendant wants to put the
9 issue to the jury.

10 THE COURT: There was an application of bail,
11 the Court took it under consideration.

12 MR. LEVIN-EPSTEIN: The bail was reduced by
13 90 per cent in this case.

14 MR. LEITEL: We appreciate that, your Honor,
15 and I point out the last time --

16 THE COURT: We gave him every right any citizen
17 would receive in any court in the United States.
18 He is only entitled to rights that every other defendant
19 is entitled to.

20 MR. LEITEL: The defendant does not deny that.
21 The last time we were before this Court two weeks ago
22 we were instructed if this wasn't resolved to be ready
23 by the 21st, ready to go to trial.

24 THE COURT: If you didn't come with your new
25 defense it would be.

1 MR. LEITEL: I don't know how your Honor
2 characterizes it as a new defense. There has only been
3 one issue.

4 THE COURT: Never raised that this man did not
5 know the nature of his act at the time that he
6 committed it, so that he lacked criminal responsibility
7 under the circumstances. That has never been raised.
8 What has been raised is his incompetency -- even when
9 he stands before me, they claim he's competent, which
10 has been resolved by doctor's testimony and doctor's
11 statements, so I will give an adjournment, if that's
12 necessary under the circumstances. I'll grant an
13 adjournment.

14 MR. LEVIN-EPSTEIN: The Government will submit
15 today a proposed order for criminal responsibility.
16 Once we contact a physician to examine Mr. Pineros,
17 perhaps your Honor could set it down. I don't believe
18 that we will be able to have the matter scheduled after
19 examination prior to the time the Court is planning on
20 taking a summer leave. I would ask for a date in
21 September.

22 THE COURT: We'll put this one on for
23 September 3rd.

24 MR. LEITEL: I have a trial to begin September 2.
25 The defendant would object to any adjournment beyond

1 September 3rd, the ninety-day rule.

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2 THE COURT: Not in this case.

3 MR. LEITEL: The defendant feels --

4 THE COURT: This is exceptional circumstances
5 had under the speedy rules.

6 MR. LEVIN-EPSTEIN: But any time the defendant's
7 competency is put in issue --

8 THE COURT: I include myself under that section
9 that I am entitled to a vacation, and I am going to take
10 it. I am ready today. You have your defense, then you
11 must abide. Your advocacy as a lawyer, the Government
12 has a right to prepare its case to meet that.

13 MR. LEITEL: Maybe we could begin this on
14 Wednesday.

15 MR. LEVIN-EPSTEIN: The Government's doctor
16 would not have a proper diagnosis without first
17 considering the report of the defendant's doctor.
18 Mr. Leitel has clearly expressed that he is not in
19 possession of any such report.

20 MR. LEITEL: I could be in possession by
21 Tuesday. The Government could today have its doctors
22 examine this defendant, have the doctor's report in
23 its hand. The doctor's testimony wouldn't be called
24 for until Thursday or Friday. Why keep this man in
25 jail another day and a half?

1 THE COURT: I am not keeping him in jail.

2 That's not a fair statement. He has a right to get
3 out if he meets the bail requirements, the bail
4 requirements have been reduced, if he can meet them.

5 MR. LEITEL: He cannot meet the bail
6 requirements. The bail requirements were lowered for
7 the purpose of getting him off maximum security. He
8 is going to remain in jail until September. I would
9 like to see this started and a jury determination made.

10 MR. LEVIN-EPSTEIN: The jury cannot make a
11 legal determination without appropriate evidence
12 before them; the Government cannot adduce appropriate
13 evidence without the opportunity to provide an
14 examination.

15 MR. LEITEL: The Government can have its doctor
16 examine this man this very week and have the report
17 of my doctor in its hands, and have the doctor ready
18 to testify with all available data when he's called
19 to testify.

20 THE COURT: You are certain your doctor is
21 going to have a report in tomorrow?

22 MR. LEITEL: Yes.

23 THE COURT: We'll put it on for a status report
24 on Wednesday; that's fair enough.

25 MR. LEITEL: May I just hand up this order, this

1 is for the appointment of the psychiatrist for your
2 signature.

3 MR. LEVIN-EPSTEIN: The Government will provide --

4 THE COURT: Why don't you in the meantime have
5 your man examine?

6 MR. LEVIN-EPSTEIN: We'll make every effort to
7 expedite the examination.

8 I'll submit to the Court what the prognosis
9 with respect to time is. If the doctor indicates that
10 he could be prepared to testify this week, the Govern-
11 ment is happy to go forward.

12 THE COURT: We must not forget that utilization
13 of the jurors, spending money unnecessarily, that we
14 don't want to do.

15 MR. LEITEL: I'll have the report to the
16 Government by tomorrow, then we can meet here again on
17 Wednesday morning.

18 THE COURT: All right, Wednesday morning status
19 report.

20 (Whereupon, recess taken)

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Rendon-direct

in evidence.

MR. LITTEL: Dr. Rendon, please pass in front and be seated at that chair.

THE COURT: No. Stand right there. He has to be sworn.

Raise your right hand.

M A R I O R E N D O N, called as a witness, having been first duly sworn by the clerk of the court, testified as follows:

THE CLERK: State your name, sir.

THE WITNESS: Mario, M-a-r-r-i-o, Rendon, R-e-n-d-o-n.

THE CLERK: Government's Exhibit 26 in evidence.

(Article referred to was received and marked Government's Exhibit 26 in evidence.)

DIRECT EXAMINATION

BY MR. LITTEL:

Q With the Court's permission, Dr. Rendon, will you please for the record and for the jury state what is your occupation or profession.

A I am a psychiatrist.

Q Dr. Rendon, where were you born, sir?

A I was born in Medellin, Colombia.

1
2 Q Did you study for your profession in Colombia
3 as well, sir?

4 A I went to medical school in Colombia for my
5 medical training and I did part of my psychiatric training
6 in Colombia.

7 Q So that the practice of psychiatry now is
8 your specialization?

9 A Yes, sir.

10 Q Are you so licensed now by the State of New
11 York in your profession of psychiatry?

12 A Yes, sir.

13 Q And since when have you been so licensed, sir?

14 A I have been licensed since -- just a second,
15 let me make sure.

16 (Witness examines document from briefcase.)

17 A (Cont'g) I do not have the date here of my
18 curriculum, but 1971, perhaps.

19 Q Now, you said that you received your medical
20 training in Colombia and part of your training involving
21 your specialty. Will you continue, please, and describe
22 to the jury in more detail where you received your training,
23 what institutions of learning?

24 A I did about six months of training in psychi-
25 atry in Colombia. And then I came to the United States as

an exchange visitor and I worked at the Fairfield Hills Hospital. This is in Western, Connecticut.

I was a resident in psychiatry there for one year and then I came to Bellevue Hospital of New York University Medical Center and I was a resident in psychiatry for two more years to complete the training in psychiatry.

Since then I have been working at Bellevue Hospital at New York University.

Q In what capacity are you work at Bellevue and New York University?

A At this point I am a full-time attending psychiatrist at the Bellevue Hospital and I am clinical assistant professor of psychiatry at the New York University Medical School.

Q Do you have your own practice of psychiatry in addition to your teaching functions, doctor?

A Yes, I have my private office and I practice psychoanalysis and general psychiatry.

Q Now, doctor, have you ever been a witness or have you ever testified before on behalf of any defendant in any criminal prosecution in any court?

A No, sir.

Q This is the first time?

A Yes, sir.

1
2 Q Did you examine this man Gilberto Anaya -
3 Alfonso Pineros?

4 A Yes, I did.

5 Q Where did you examine this man?

6 A I examined him in the precinct on the 19th of
7 July. It was a Saturday morning.

8 Q Did you examine this man through an interpre-
9 ter?

10 A No, I examined him in Spanish, my native
11 language.

12 Q Doctor, in addition to examining this man --
13 MR. LEITEL: Let me withdraw that question.

14 Q Why did you examine this man? How did you
15 come to go to the Federal Detention Headquarters to examine
16 this man? Will you explain that?

17 A Well, a friend of mine, a psychiatrist called
18 me. He is a Spanish-speaking psychiatrist also --

19 MR. LEVIN-EPSTEIN: I am going to object as
20 irrelevant of how he came to examine him. The fact
21 is he examined him.

22 Q Doctor, was it at my behest that you went to
23 the detention center to examine this man?

24 A Yes, sir.

25 Q Did you go accompanied by me to examine this man?

1
2 A Yes, sir.

3 MR. LINTON: Thank you, sir.

4 Q And, doctor, in addition to your personal
5 examination in Spanish of this man did you have occasion
6 to review any documents?

7 A I did review several documents. I reviewed a
8 couple of documents from Colombia and some psychiatric
9 reports from Kings County and Springfield. I also examined
10 some transcripts of conversations of Mr. Amaya with some
11 agents.

12 Q Now, let me just for the record clarify it.
13 I'd like to show you what has been marked in evidence as
14 the English translation of a report from the Ministry of
15 Justice of Colombia. Did you have an opportunity to
16 examine the original thereof as well as the translation?

17 A I examined the original but not the English
18 translation.

19 Q The original in Spanish?

20 A Yes.

21 Q I show you the English translation again of
22 a report received from Colombia as well relating to an
23 automobile accident in which the defendant was involved
24 and which has been received in evidence. Did you have
25 the opportunity to examine again the original thereof in

1
2 Spanish?

3 A I did examine it in Spanish.

4 MR. LEITEL: Thank you, sir.

5 Q Did you have the opportunity, doctor, to
6 examine a report dated January 25 of 1973 from Kings County
7 Hospital?

8 A Yes, I did.

9 MR. LEITEL: May we have these marked, please.

10 THE CLERK: Document marked for identification
11 as Defendant's Exhibit H.

12 Document marked for identification as
13 Defendant's Exhibit I.

14 Document marked for identification as
15 Defendant's Exhibit J..

16 Document marked for identification as
17 Defendant's Exhibit K.

18 (Documents referred to were received and
19 marked Defendant's Exhibits H, I, J, and K, respect-
20 ively for identification.)

21 MR. LEITEL: Thank you very much.

22 Q Doctor, we left off indicating that you had
23 the opportunity to examine this report of January 25, which
24 is now Defendant's Exhibit H, from the Kings County Hospital
25 Center.

1
2 A Yes.

3 Q This document, the original thereof, being
4 in English?

5 A Yes, I did.

6 Q Doctor, did you have the opportunity to exam-
7 ine a series of reports, the first of which is dated April
8 17, 1974 from the Medical Center for Federal Prisoners at
9 Springfield, Missouri?

10 A Yes, I did examine some reports from Spring-
11 field, Missouri.

12 Q Will you take a look and tell me whether
13 those are the reports that you examined?

14 A Yes, this one I did, sir.

15 Q Now, doctor, I hand you a series of reports,
16 and a letter which is dated November 18, 1974 again: from
17 Medical Center for Federal Prisoners in Springfield,
18 Missouri. Will you look at that and this is marked Defend-
19 ant's Exhibit J; would you also examine that to see if that
20 is in fact what you reviewed and studied?

21 A Yes, sir.

22 MR. LEITEL: Thank you.

23 Q Now, for the last medical reports I will
24 give you a report again from the Kings County Hospital
25 Center dated February 19, 1975, marked Defendant's Exhibit

Rendon-direct

K. Would you look at that, please, and tell me whether you have had the opportunity to examine that as well?

Doctor, in addition to those medical reports in addition to --

A Yes, sir, I examined this one.

MR. LEITEL: Thank you very much.

Q In addition to the medical reports, did you have an opportunity to read and examine what I will show you first as Government's Exhibit 20, a transcript of the conversation between Special Agent Gray and one Alfonso Pineros recorded on January 10, 1974? Did you have a chance to read and examine that?

A Yes, sir.

(Continued on next page.)

Rendon - direct

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DIRECT EXAMINATION

BY MR. LEITEL: (Cont.)

Q Did you have a chance to examine what is marked Government's Exhibit 6, "Transcript of a conversation between Agents Kobell and Gray and Alfonso Pineros and Jorge Rodriguez recorded on December 11th, 1973"?

A Yes, sir.

Q Did you have a chance to examine Government's Exhibit 7, A Transcript of a conversation between Agent Gray and Alfonso Pineros recorded on December 11th, 1973"?

A Yes, sir.

Q Now, the last two of these reports are noted as Government Exhibit 16 and Government Exhibit 18, the the transcripts, apparently, of phone conversation between an Agent Gray and a Jorge Rodriguez.

Did you have an opportunity to read those and examine those, as well?

A No, sir.

MR. LEITEL: Thank you, sir.

I will, at this time, your Honor, offer into evidence what has been marked Defendant's Exhibit K, the report of Kings County Hospital Center.

As Defendant's Exhibit H, report again from Kings County Hospital Center, January 25, 1973. The

Rendon - direct

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first report being February 19, 1975.

I will offer into evidence Defendant's Exhibit I, report from the Medical Center Federal Prisons, at Springfield, April of '73 and I will offer into evidence the Defendant's Exhibit J, report dated November 18, 1974 from the Medical Center for Federal Prisoners at Springfield, as well.

MR. LEVIN-EPSTEIN:

THE COURT: Mark them.

MR. LEITEL: Thank you, sir.

THE CLERK: Defendant's Exhibits H, I, J and K, previously marked for identification, now marked in evidence.

(So marked.)

BY MR. LEITEL:

Q I would ask you first: Explain in language understandable to myself and any other laymen, what the diagnosis was in a report that was yesterday marked into evidence as with regard to the automobile accident incurred by this defendant on May 22, 1971.

I had the opportunity, unfortunately, to bore everyone to death by trying to read the technical language to the jury yesterday. I wish if you could, please, simply in terms that I could understand, explain to me what the

1
2 indicated diagnosis was and the injuries sustained by the
3 defendant on that occasion, if you would please.

4 A I have a report from Dr. Jairo Munoz Escobar.
5 It says here, Date of Admission: May 22, 1971 and date
6 of discharge, July 22, 1971 and the diagnoses are as follows:

7 Number one, multiple trauma. It means that
8 the patient had multiple injuries.

9 Number two: There is a head trauma -- severe
10 head trauma with cerebral concussion and a fracture
11 of one of the bones of the cranium and there was also
12 a hemorrhage -- bleeding into the space that is
13 between the covert of the brain -- there was bleeding
14 in those membranes.

15 "Number three: There is a fracture of the left
16 foot and there is also a fracture of the right leg.

17 "There is also a fracture of the right forearm."

18 These are just fractures.

19 There is also a fracture of the nose bones, so
20 that they are multiple fractures and there is brain
21 trauma with bleeding, in simple terms, I would say.

22 Q Thank you.

23 In addition to this report and your conversa-
24 tions with the defendant, did you have a chance to examine
25 certain physical wounds or scars that I believe appear on the

1 4 Rendon - direct
2 defendant's left leg while we were in the Federal Detention
3 Center?

4 A I examined some -- all the scars that the
5 patient showed me and they were located in the lower left
6 extremity. They were very extensive scars and the patient
7 stated that he inflicted those to himself while he was under
8 the belief that he was a doctor.

9 At some point he told me that this happened
10 while he was in Venezuela but at a different point he told me
11 this happened in Colombia, so I couldn't determine.

12 What was striking to me that those scars are
13 not described in the medical reports as secondary to this
14 accident.

15 Q In other words, are you saying the reports
16 as to his leg -- are you saying that the scars that you find
17 now on his leg, at least from the report, with regard to
18 the injuries received in this accident, that they do not coin-
19 cide -- the report of this accident does not seem to indicate
20 that this accident produced the scars?

21 MR. LEVIN EPSTEIN: I will have to object to
22 this line of questioning. I have waited and waited.
23 It appears to be leading and irrelevant.

24 THE COURT: The doctor is not here for that
25 purpose. He is here to give an opinion as an expert

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Rendon - direct

as to what he believes whether this defendant has responsibility as to his criminal acts on the date these acts were committed.

MR. LEITEL: Your Honor, my offer of proof and the reason I am going into this area --

THE COURT: The legs have nothing to do with it. If you want to speak about the head, that is something else.

The legs have nothing to do with his psychiatric condition in this case.

MR. LEITEL: My reason of going into this area is to show by medical testimony that a man -- at least it's indicative of a man's condition at the time of the accident. If I can establish that the wounds to his legs were self-inflicted while under the influence of a delusion or hallucination, my offer of proof is it is relevant to this man's state of mind at a subsequent occasion.

MR. LEVIN-EPSTEIN: I will withdraw the objection.

THE COURT: All right.

BY MR. LEITEL:

Q Doctor, going back to my question, please, would you indicate if you can, what you believe from this report,

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2 that the injuries that you observed to this man's leg, were
3 produced as a result of this accident -- this automobile
4 accident?

5 A I have no reason to believe that these scars
6 were produced by the automobile accident because they are not
7 described in the medical report.

8 MR. LEITEL: Thank you, sir.

9 Q Doctor, based upon your examination of this man,
10 your reports, the medical reports from the various hospitals
11 that you have read, did you come to any conclusions or make
12 any findings with regards to any mental disturbance or
13 disease that this defendant might be suffering from?

14 A Yes, sir. I came to the conclusion that this
15 patient has been possibly mentally disturbed from adolescence.
16 I base this opinion on the fact that he described several
17 episodes of hospitalization in Colombia and he described
18 having been treated with electro-shock treatment.

19 Q Did his answers to your questions indicate
20 in your opinion a knowledge of electro therapy, did he
21 seem to know the process?

22 A He was able to describe what a lay person
23 would be able to describe as to an electric machine and
24 putting two things over his head and have an electric current
25 go through.

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Rendon - direct

Q Is that the type of procedure employed, to your knowledge, in the medical institutions in your country, in Colombia?

A Yes, sir.

Q Doctor, did the patient discuss any possible medications that he had been taking while in Colombia?

A The patient told me he was taking pills but he did not know the name of them. I asked him if it could be Largagtil, which is the most commonly used psychiatric agent in Colombia and he said it sounds familiar.

Q Did your study or analysis or the reports from the mental institutions where this man has been interned in this country indicate that he had been taking any medication while in this country?

A I think it's in the report -- the first report from Springfield it was stated that Mr. Amaya was receiving treatment with a drug called stelazine.

Q Would you please tell the jury what that drug is?

A Stelazine is a drug similar to thorazine which is one of the most widely used anti-psychotic drugs at present. It's a drug for psychosis. It's used in the treatment of psychoses.

(continued next page.)

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Rendon - direct

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DIRECT EXAMINATION

BY MR. LEITEL (Cont'd):

Q Doctor, I would like you to tell us more about what you base your belief upon with specific references either to the transcripts or any of these reports that you have examined, and I believe you still have in your possession, why you have come to your conclusions.

A Well, number one, the patient describes a history of a chronic mental disturbance with treatment for it.

Number two, in going over the transcripts, I was able in comparing Mr. Anaya's sentence with the other people who were talking in the transcripts to observe that they are bases for thinking disturbances which go into my impression beyond the pure element of lack of knowledge of the language.

Number three, my examination of Mr. Anaya revealed to me that he had some, what we call bizarre thinking at times or what we call sometimes very peculiar personal thinking or autistic thinking.

Q Would you explain to us what that means or refer to examples as what you characterize as bizarre responses or bizarre sentence structures?

A At some point during the interview, he told me that he would like to die because he could pay the Government with his body and also he said that he could become a store or

1 2 Rendon - direct

2 a fish. He believed that after death he could do that and he
3 feed his children with fish.

4 It is the kind of thing that has been described
5 in so-called schizophrenia.

6 Q You use the word "schizophrenia."

7 Would you explain to the Jury, please, what
8 that means and how that term would relate to your diagnosis
9 of this man's condition, sir?

10 A Well, let me -- the word "schizophrenia" means
11 split mind and what it basically consists of is of a disorder
12 in thinking.

13 Now, there are two parts of thinking, one is
14 the content of thinking and the other one is the form of
15 thinking. Delusions, for example, or disorders in the content
16 of thinking which is for example someone believes that
17 people are against them, that they are persecuting them, that
18 is a content of thinking.

19 The other disturbance in thinking is a form of
20 thinking which is basically when people cannot put their
21 ideas in a logical stream or communicate the ideas in a logical
22 way.

23 Q Doctor, how did you find -- did you go -- under-
24 go any test to test his memory -- built to recall the past?

25 A Well, simply by asking him questions about his

1 3 Rendon - direct

2 life and sometimes by repeating questions later, I found
3 out that his recent memory was fine. He knew that I had
4 asked him questions earlier, but he had difficulties in
5 giving data about his past history, years ago, his childhood
6 or adolescent or twenties, let's say.

7 He was not able to order the data that he gave
8 me chronologically. He would give me a sequence of events
9 and later on he would give me a different sequence of the
10 same events.

11 Q Doctor, these different sequences, these in-
12 consistencies or incongruities, of the accounts that he gave
13 you of his life, what do you get from that? What is your
14 interpretation, your basis for that? What do you find in
15 such inconsistencies in the accounts that this man has
16 given to you?

17 A As I stated in my written opinion, I believe
18 there could be two ways to interpret this:

19 Number 1: Just by the simple fact that the
20 patient may be faking or lying or making believe;

21 Number 2: That the patient is what we call
22 confabulating, means that there are gaps in the memory or there
23 are gaps in the thinking, and the patient tried to fill those
24 gaps with his own version, with his own imagination, trying
25 to put them together.

1 4 Rendon - direct

2 Q How about his judgment, what is your opinion
3 with regard to this man's judgment, his ability to analyze
4 a situation?

5 A His judgment at the moment of my examination
6 was good as proven by the fact that he upon my starting to
7 ask him questions, he asked that I identify myself for example,
8 but I believe that he has had poor judgment in the past.

9 For example, I believe he did not contribute
10 all the evidence that he could have to the doctors that
11 examined him before about the car accident or the possibility
12 of two head traumas.

13 There are two different reports with two differ-
14 ent dates. He didn't offer this to the doctors, which would
15 be in helping his case, I would say, in terms of having had
16 mental disease, having had electro-shock therapy, having had
17 head trauma.

18 This information he gave me he did not give to the
19 other doctors and that makes me believe that his judgment
20 was poor, because if I were in his case, I would have tried
21 to collect as much as possible.

22 Q Doctor, is there anything in the reports, and
23 in particular the first report we have from the Kings County
24 Hospital Center of January 25, '73, which is the closest
25 document we have as to the actual time of these events?

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Rendon - direct

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Is there anything in that report that would help you make a judgment with regard to his judgment at the time of these acts?

In other words, November, December, of '73 and January of '74, based upon this report in January of '73, from the Kings County Medical Center.

A I think Dr. Schwartz's reports are very objective and I believe -- both of them are very objective --

Q Excuse me. By Dr. Schwartz's reports, you are referring to Defendant's Exhibit H, which is the report of the Kings County Hospital Center from January of '73?

A The two Kings County reports.

Q Thank you. Would you continue?

MR. LEVIN-EPSTEIN: Is that January of 1973?

MR. LEITEL: That's what the date is on this report, sir.

The document states January 25, 1973. I assume it is a typo because this obviously came ^{after} ~~off~~ the defendant's ^{arrest} ~~wrist~~ which was probably January 25th of '74, rather than '73.

Q Continuing, doctor, is there anything in this report of January of '74 that would give you a basis for judgment as to his judgment and reasoning at the time of these events?

6

Rendon - direct

1
2 A According to this report, the patient was
3 blatantly psychotic. He was under the belief that he was
4 the savior of the world, he was Jesus Christ and he was carry-
5 ing a picture of many with him and he would speak to God,
6 etc.

7 He was under what I earlier stated a delusion
8 and belief which is a content of thought problem. He was
9 evidently psychotic at that time from Dr. Schwartz's report.

10 Q At that time would be January of 1974, when he
11 was examined at the Kings County Hospital Center; is that so,
12 sir?

13 A Yes, sir.

14 Q Isn't it true with regard to many of the facts
15 with regard to this man's life which you are basing your
16 opinion, which -- that many of these facts come only from
17 this man; is that not so?

18 A Would you please repeat the question?

19 Q Surely.

20 Doctor, other than these four reports from
21 mental hospitals in this country, and the two reports from
22 the doctor in Colombia, as well as the various transcripts
23 of conversations that you have examined, isn't it a fact that
24 there are other pieces of information about this man that
25 came only and exclusively to you from him and from no other

7 Random - direct

1
2 sourced?

3 A That's true.

4 Q And therefore, doctor, isn't there a possibility
5 that this man was making these facts up, these additional
6 facts upon which you in part are basing your opinion?

7 A You ask me if there is a possibility that he's
8 making up these parts?

9 Q That's correct.

10 A There is a possibility, yes.

11 Q Doctor, viewing that possibility, some of the
12 basis of your opinion, could have been made up by this man,
13 does that change your diagnosis of this man -- your analysis?

14 A I believe that -- I have to use my judgment
15 for making this opinion, that if Mr. Amaya was trying to fake
16 his version -- his story would be more coherent.

17 Now, how much of what he says is true, how much
18 of what he says is fantasy, I do not know, but what I know
19 that the way he puts things together, reveals to me that he
20 is in my opinion not just faking.

21 Q Doctor, are there portions of these transcripts
22 that you have read that help you arrive at that position --
23 actual portions of speech by this defendant reflected in those
24 transcripts?

25 A Yes.

1 Rendon-direct

2 Q Doctor, if you can take a look at them, I
3 would very much appreciate if you could point out to me
4 which portions of the transcript tend to point out this
5 thinking disorder or judgment disorder.

6 A I have a transcript CL-73-0492 --

7 Q That is a conversation between Agent Gray
8 and this defendant recorded on January 10, 1974, the day of
9 his arrest I believe?

10 A Yes.

11 Q Would you indicate what portions --

12 MR. LEVIN-EPSTEIN: The Doctor is reading from
13 what has been marked as Government's Exhibit 20 in
14 evidence, your Honor.

15 Q Would you continue, please.

16 A There is a lot of unintelligible language.
17 I do not know if this is a recording problem. I did not
18 have a chance to listen to the tapes. I will read you for
19 example from the first page of this report.

20 Q Thank you.

21 A It says:

22 "Agent Gray: Jorge says you are going to
23 move. Where are you going to move to?

24 "Mr. Amaya: What?

25 "Agent Gray: Jorge says you and he are going

2
1 Rendon-direct

2 to move to a new apartment. Where are you going to
3 move to?

4 "Mr. Amaya: No understand.

5 "Agent Gray: You are going to move -- you are
6 going to go live there?

7 "Mr. Amaya: Yes, much problems no.

8 "Agent Gray: Yeah, okay."

9 Now, it seems to me that answer is not
10 logically connected to the question. I have another piece
11 here and this is another transcript of Exhibit T--

12 Q You are referring to a conversation on
13 December 11, 1973 between Agent Gray and this defendant,
14 which is Government's Exhibit 7 in evidence.

15 A I will read you from the transcript this
16 conversation.

17 Q Thank you.

18 A It says "T" which is Mr. Amaya: "Inaudible,
19 pause, where you from?

20 "Agent Gray: What?

21 "Amaya: From.

22 "Agent Gray: Where am I from?

23 "Amaya: From, from.

24 "Agent Gray: Wheres?

25 "Amaya: From.

Pendon-direct

"Agent Gray: Wheres my friend?

"Amaya: No, you're from, from --

"Agent Gray: From, where am I from?

"Amaya: Yes.

"Agent Gray: From the United States.

"Amaya: United -- New York.

"Agent Gray: Oh, no, no.

"Amaya: No.

"Agent Gray: West -- West California.

"Amaya: Ah, yes.

"Agent Gray: Did you ever go to California?

"Amaya: Yes.

"Agent Gray: Where?

"Amaya: I got a California (laughing)"

Now, there is a number of times he says
"from, from." I take this to be stereotyped repetitious
language, which obviously makes the communication very,
very difficult and in the end he says he got California.
I think this is very difficult communication.

Q After having read all these transcripts,
would this difficulty be attributable to a language barrier?

A I believe part of it is language barrier, but
I also believe that part of it is a thinking problem --
this is a thinking problem.

Rendon-direct

Q Doctor, what in your opinion, if you can give us an opinion, would you judge this man's mental being -- his mental state, his mental state of health back in November and December of 1973 and January of 1974?

Is that possible for you to give us an opinion with regard to his status at that time?

A I cannot commit myself to a definite opinion about his mental health at that time. If my suspicion is correct, this man has had a mental disturbance, fluctuating, and I cannot say how he was at the time during those months. All I can say is based on these transcripts, which of course are subject to interpretation of the tapes or mistakes or whatever, but I think on those transcripts there is a basis to believe that there is some degree of thinking disturbance.

Q Doctor, how about this addition to these reports as a basis for that opinion? Are you helped in arriving at an opinion as to his condition at that time as to the most recent reports from the hospitals immediately after his arrest? Does that influence your opinion as to his judgment at or about that time?

A It is obvious that after the arrest he was very disturbed, very sick, but that does not mean that he was like that before the report.

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Pardon-direct

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3 Nevertheless Dr. Schwartz raises the question
4 that without more information it is impossible to determine
5 the prognosis. He is talking about the future of the
6 condition that he saw. What he was stating was the fact if
7 he would know the past of this person, he would probably
8 be able to talk about the future and he raised the question
9 -- a very pertinent one that his psychosis may have
10 reacted to having been arrested. I believe if he had had
11 the information that Mr. Amaya provided me with and was
12 gathered from Colombia, perhaps he would be able to think
13 of a chronic problem rather than an acute reaction.

14 Q You mentioned that this man's condition
15 might fluctuate sometimes?

16 A Yes.

17 Q Will you describe what you mean by that and
18 whether that is a characteristic of his condition?

19 A Well, this is a question -- the same question
20 that Dr. Schwartz raised in that report and there is a
21 report by a Dr. Weiss. In that report he states also that
22 this may well be a psychotic individual who goes through
23 periods of exacerbation, worse conditions, and then improves.

24 Q That type of behavior, worse, better, greater
25 degree of clarity, lesser degree of clarity, is that common
in your medical opinion -- is that characteristic?

Rendon-direct

A It used to be before the discovery of modern drugs for its treatment of psychoses that most patients would deteriorate, but after the advent of the new drugs most people respond very favorably to the treatment and they relapse if they stop taking the drugs. Sometimes they stop and they do not relapse. There are many, many cases where there is a psychotic type of process that goes up and down. I would suspect that there is a possibility that that may be the case here.

Q Those new drugs that you were talking about, do the reports of the hospitals that you have read indicate that he was in fact administered any of those new type drugs that you have indicated?

A I do not know about Kings County Hospital. It was not expressed in the report, but I do know that at Springfield he did receive one of those drugs and that is Stelazine as I stated earlier.

Now, I understand at present he is not taking this medication. He is on Valium, which is a minor tranquilizer.

Q How did you learn that he was presently under such medication?

A First of all he told me during the interview and then I saw it this morning when I was reading

7 1 Dr. Abramson's report, he states that in his report.

2 Q What does he state?

3 A He states that --

4 MR. LEVIN-EPSTEIN: I am going to object to
5 this.

6 MR. LEITEL: From memory.

7 A He states that he's receiving 10 milligrams
8 of Valium, twice a day as I understand it.

9 MR. LEITEL: Thank you, sir.

10 Q Doctor, how do you find the man today?

11 MR. LEVIN-EPSTEIN: Objec tion.

12 THE COURT: Sustained.

13 Q Do you find in your medical opinion, from
14 what you are able to analyze from the transcript of the
15 tapes as well as the reports from the hospital upon his
16 interment there after his arrest, do you find that there
17 has been any improvement in his condition from that which
18 is indicated at the time of these occurrences in November,
19 December of 1973 and January of 1974?

20 A There is definitely some improvement --
21 substantial improvement. I did some of the tests with him
22 that people at Springfield tried to do and he was not able
23 to do it there.

24 Q What were those?

25 A For example interpreting proverbs. He was

Exxon-direct

not able to and with me he did it perfectly.

Q When was he not able to do it?

A At Springfield. When I asked him proverbs, he was able to interpret them. I asked him to do some mathematics that he was not able to do at Springfield but he was able to do with me.

Q You do find there is substantial improvement from what his condition was at that time?

A Yes.

MR. LEITEL: Thank you. I have no further questions.

THE COURT: We will take a short recess at this time.

(Recess taken.)

(continued next page)

1 (After recess.)

2 (The following occurred in the absence of
3 the jury.)

4 THE COURT: All right, bring the jury in.

5 (The jury thereupon returned to the courtroom
6 at 11:35 o'clock a.m.)

7 M A R I O R E N D O N , called as a witness, having
8 previously been duly sworn, resumed the stand and
9 testified further as follows:

10 THE COURT: All right, ready now for cross-
11 examination.

12 MR. LEITEL: Just one second. There is
13 something I overlooked.

14 Would you please mark this.

15 THE CLERK: For identification?

16 MR. LEITEL: Yes.

17 THE CLERK: Document marked for identification
18 as Defendant's Exhibit L.

19 (Document referred to was received and marked
20 Defendant's Exhibit L for identification.)

21 DIRECT EXAMINATION

22 BY MR. LEITEL (Continuing):

23 Q Doctor, I show you this document marked
24 Defendant's Exhibit L. Is this a true copy of the original
25 thereof, a report that you submitted with regard to your

Rendon-direct

diagnosis and observations as to this defendant?

A Yes sir.

MR. LEITEL: I offer this into evidence.

MR. LEVIN-EPSTEIN: No objection.

THE CLERK: Defendant's Exhibit L previously marked for identification now marked in evidence.

(Document referred to having previously been marked Defendant's Exhibit L for identification was now received and marked Defendant's Exhibit L in evidence.)

MR. LEITEL: I have no further questions of this witness.

THE COURT: All right.

MR. LEVIN-EPSTEIN: May I cross-examine, your Honor?

THE COURT: You may.

CROSS-EXAMINATION

BY MR. LEVIN-EPSTEIN:

Q Dr. Rendon, what is the test in this jurisdiction for whether or not a man is criminally responsible for his acts?

A The test, as I understand, is the substantial capacity of the person to understand his behavior, or the context of his behavior in terms of the law.

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REndon-direct

Q Isn't it a fact, Doctor, that the test more accurately stated is that at the time of the alleged offense it must be shown that the defendant was suffering from a mental disease or defect which prevented him from having that substantial capacity?

MR. LEITEL: Objection, Your Honor. He's asking this witness, who's a medical doctor, to give expert testimony as to his opinion on a legal basis. I think it is completely --

MR. LEVIN-EPSTEIN: I will rephrase the question.

MR. LEITEL: -- within the jurisdiction of the Court to give to the jury.

MR. LEVIN-EPSTEIN: I will rephrase the question.

Q Would a mental disease or defect in the patient have any bearing on your opinion as to his competency or responsibility to commit a criminal act? Yes or no.

A Yes, in a matter of degree, as I understand it.

Q Now, Doctor, during your direct examination you testified that you had examined the patient, in this case the defendant, on I believe it was a date in July,

Rendon-cross

that correct?

A July 19th.

Q On a Saturday morning?

A Yes sir.

Q How long was that examination, sir?

A It was for almost two hours.

Q And you spoke with him in Spanish?

A Yes sir.

Q And he spoke with you in Spanish?

A Yes sir.

Q And he told you answers to questions that you propounded to him?

A Yes sir.

Q And then you asked other questions based upon those answers, I assume? Is that correct?

A Well, it was a little bit difficult because of his own verbosity. He would go from one topic to another that weren't completely relevant so I had to structure the interview with questions, etcetera.

Q He did not withdraw from you, did he?

A He did not.

Q When you first met him was it your testimony, Doctor, that he was present with you and his lawyer, Mr. Leitel?

Pendon-cross

A Yes sir.

Q Is it a fact, Doctor, that you testified a moment ago that this man upon meeting you before he would talk to you insisted upon Mr. Leitel identifying you as a doctor?

A Yes.

Q Would that indicate to you, sir, any capacity of awareness of the situation?

A Yes sir.

Q And isn't it a fact --

MR. LEITEL: Your Honor, objection. What relevancy does the man's capacity of awareness on July 19, 1975 have to do with his responses in November, December 1973 and January 1974?

MR. LEVIN-EPSTEIN: I will withdraw the question.

MR. LEITEL: I ask the question and answer be struck.

THE COURT: All right, it is stricken.

Q You also testified, Doctor, that you had the opportunity to examine, aside from the patient himself, a number of documents?

A Yes sir.

Q I believe you testified that you had examined

Rendon-cross

1
2 certain psychiatric reports that had been prepared of this
3 patient?

4 A Yes.

5 Q In fact you had examined -- Mr. Leitel, may
6 I have the defense exhibits?

7 (Mr. Leitel hands documents to Mr. Levin-
8 Epstein.)

9 Q (Continutin) Doctor, you said you had
10 examined for example Defendant's Exhibit I, that is a
11 report from Springfield?

12 A Yes sir.

13 Q Defendant's Exhibit K, this report from
14 Kings County?

15 A Yes.

16 Q And Defendant's Exhibit H, this report from
17 Kings County?

18 A Yes sir.

19 Q And Defendant's Exhibit J, this report from
20 Springfield, is that correct?

21 A Yes sir.

22 MR. LEVIN-EPSTEIN: May I have them, Doctor?

23 Q And you also testified, did you not, that you
24 had the opportunity to examine these various transcripts,
25 three transcripts you mentioned?

Rendon-cross

A I did.

Q Doctor, did you listen to the tapes on those transcripts?

A I did not.

Q Did you ask to listen to the tapes of those transcripts?

A I did not.

Q Doctor, were you told about certain videotapes that were performed or made of the defendant during the appropriate times of the indictment?

A Yes.

Q Did you see those videotapes?

A I did not.

Q Did you ask to see those videotapes?

A I did not.

Q Doctor, you testified in pertinent part on direct examination to certain pharmaceutical therapy that you had a belief Mr. Pineros was undergoing or had undergone, is that correct? Drugs that he had received?

A Yes.

Q Where did this information come from, sir?

A Part of it from myself as to the past in Colombia and part of it from the Springfield report.

Q Doctor --

Rendon-cross

MR. LEVIN-EPTSEIN: I ask that these be marked for identification, please, your Honor.

THE CLERK: Document marked for identification as Government's Exhibit 27.

(Document referred to was received and marked Government's Exhibit 27 for identification.)

Q I show you what has been marked as Government's Exhibit 27 for identification and I ask you have you ever seen that before?

A No sir.

Q Is it not a fact, Doctor, that those records that I have shown to you just now are the medical records from the West Street Federal Detention Headquarters on this patient or this defendant?

A Yes, this says Department of Justice.

Q And you never saw this, did you?

A No sir.

Q Did you ever ask to see this?

A I didn't know it existed.

Q You examined the patient at West Street, though, did you not?

A I did.

Q Did you consult with the medical doctor at West Street?

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Pendon-cross

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A I did not.

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Q Did you ask to see the medical reports or
examinations that had been performed on him at West Street?

5

A No, I did not.

6

7

Q Did you ask to see the doctor who consulted
with him at West Street?

8

A I did not because --

9

MR. LEVIN-EPSTEIN: Thank you, Doctor.

10

THE COURT: Don't answer the question.

11

MR. LEVIN-EPSTEIN: Your Honor, I ask that this

12

sheaf of documents be marked for identification.

13

MR. LEITEL: May I see what is being marked
for identification?

14

15

MR. LEVIN-EPSTEIN: Absolutely.

16

THE CLERK: Documents marked for identification
as Government's Exhibit 28.

17

18

(Documents referred to were received and
marked Government's Exhibit 28 for identification.)

19

20

MR. LEITEL: Your Honor, may I have a side
bar with respect to this?

21

22

(The following discussion took place at the
side bar between the court and counsel.)

23

24

MR. LEITEL: Your Honor, I would like to make
objection and I would like to make a motion that the

25

Rendon-cross

U.S. be precluded from in any way going into or making a reference to these documents because there were motions made with respect to discovery of all medical reports and diagnoses related to the defendant. I was given everything that the Government told me they had. This was never made available to me. And now for the first time there is being shown these medical reports related to the defendant and I move for the prohibition of the Government in referring to these and that any reference to them be struck from the record.

MR. LEVIN-EPSTEIN: They are medical records made in the regular course of business. They were available upon subpoena or request. I was never requested for them. They were not made in contemplation of this trial --

THE COURT: You had a right to get these from West Street.

MR. LEITEL: I asked the Government for what they had --

THE COURT: You could have served a subpoena.

MR. LEITEL: I asked the Government for all medical records in their possession. It was represented to me that I was given everything related

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Pardon-cross

to the defendant. This was not given to me and not represented that it existed.

MR. LEVIN-EPSTEIN: Under Rule 16(b) --

MR. LEITEL: I am surprised, your Honor.

THE COURT: The nature and degree of this man's condition has been known to you as his defense lawyer. You knew he was in West Street --

MR. LEITEL: And for that reason I --

THE COURT: You could have gone to West Street.

MR. LEVIN-EPSTEIN: May I complete the record, your Honor. Under Rule 16(b) the only obligation that the Government has in terms of turning over scientific examinations and reports are those which are prepared in contemplation of trial. I am not offering them in evidence. I am offering them as background material for the doctor --

MR. LEITEL: But the Government is making the jury aware of the fact that there are other medical reports in its possession.

(The following occurred in open Court.)

Q Doctor, I show you a sheaf of papers which has been marked as Government's Exhibit 28 for identification and I ask you have you ever seen those before?

Please look through them at your leisure.

12 1 Rendon-cross

2 (Witness examines document.)

3 A Parts of it I saw. Parts I did not.

4 Q Very well. Would it be fair to say that the
5 parts of this sheaf of papers that you have seen are
6 duplicates of the psychiatric reports that have been
7 admitted into evidence for the defendant?

8 A They are duplicates of the final psychiatric
9 reports.

10 Q The final psychiatric reports.
11 Would it be fair to say, Doctor, that the
12 remainder of these papers of the underlying psychological
13 examinations and diagnoses?

14 A As I see, there are a number of medical
15 reports and everyday reports during the stay of the patient,
16 and examinations that were not included in the final
17 reports, drawings by the psychologist, et cetera, et cetera.

18 Q You say there are drawings by the psychologist?

19 A Yes. Drawings by the patient that the
20 psychologist asked him to do for tests.

21 Q In other words, there are for example various
22 psychological tests that were performed by the patient at
23 the request of the psychologist?

24 A Yes sir.

25 Q You have never seen these before?

1
2 A No sir.

3 Q You mentioned in your direct testimony,
4 Doctor, that there was some question in your mind, and I
5 am paraphrasing now and correct me if I am wrong, but that
6 there was some question in your mind as to whether or not
7 certain scars or other disfigurements that were exhibited
8 by Mr. Pineros could have been created or the result of an
9 automobile accident that you saw reported, is that correct?

10 A I said I saw scares that were not described in
11 the reports from the accident.

12 Q Did you ever talk to that doctor in Colombia,
13 Doctor?

14 A No, I did not.

15 Q Did you ever try to call him?

16 A I did not.

17 Q Did you ever try to check out his diagnosis
18 of that man?

19 A I did not.

20 Q Did you ever try to find out the Colombia
21 medical records of this so-called mental illness that he
22 may have had?

23 A I didn't think that was my function.

24 Q Did you think it might have been important in
25 making a determination at this time as to his responsibility

1
2 in November and December of 1973 and January of 1974,
3 Doctor?

4 A I was called on Friday to examine this
5 patient on Saturday because the trial was starting on
6 Monday so that --

7 Q Doctor, I am asking you do you think it
8 would have been important to consider these other matters?

9 A It would have been very important.

10 Q And you did not consider them, is that right?

11 A I didn't think I would have the time.

12 Q Very well. Now, did you contact any doctors
13 in Springfield that examined him?

14 A I did not.

15 Q Did you contact Dr. Schwartz at Kings County
16 that examined him?

17 A No, I did not.

18 Q The Kings County Hospital, of course, is in
19 Brooklyn, is that correct?

20 A Yes sir.

21 Q And you say -- you testified rather on your
22 direct examination that you were practicing at the Bellevue
23 Hospital in Manhattan?

24 A Yes sir.

25 Q Did you pick up the phone once to call and

Rendon-cross

ask Dr. Schwartz about his impression?

A I was satisfied with his report.

Q Did you read all of the reports by Dr. Schwartz?

A His reports to the Court. I don't know if those are all of his reports.

Q Very well, Doctor. I show you what has been marked as Defendant's Exhibit H and K and I tell you that these are two reports by Dr. Schwartz from the Kings County Hospital. Did you read both of those reports, sir?

A Yes sir.

(Continued next page)

MR. LEITEL: Thank you.

One, as has been noted earlier is incorrectly dated January 25, 1973. I think we can agree that that means 1974.

MR. LEITEL: Of course.

Q And the other one of course is dated February 13 of 1975, approximately one year later, is that correct, Doctor?

A Yes, sir.

Q Did you review these reports in making a determination of your opinion as you announced it?

A I did.

Q Did you read the portion of Dr. Schwartz' report where it says -- this is February 19th of 1975 -- where he says, "Diagnosis unspecified personality disorder"?

A Yes, sir.

Q It doesn't say psychosis, does it?

A No.

Q It doesn't say schizophrenia of any kind, does it?

A No, sir.

Q It doesn't say severe mental disturbance, does it?

it?

A No, sir.

1
2 Q It says "unspecified personality disorder"?

3 A Yes.

4 Q Did you read the portion of this report
5 where Dr. Schwartz said, "It is my professional opinion that
6 the defendant is not presently insane"?

7 MR. LEITEL: Your honor, this document is
8 in evidence. The witness has testified that he
9 read the complete document --

10 MR. LEVIN-EPSTEIN: I will be happy to, your
11 Honor --

12 MR. LEITEL: -- the jury at its leisure can
13 examine and will I hope examine all of these documents
14 and read them carefully. I see no reason for the
15 Government to pick out technical phrases when the
16 document is in evidence.

17 THE COURT: He can examine as to any portion
18 of the report. All right.

19 MR. LEVIN-EPSTEIN: I am merely trying to
20 establish upon what portion --

21 THE COURT: There is no argument. You can
22 examine as to any portion.

23 MR. LEVIN-EPSTEIN: Very well, your Honor.

24 BY MR. LEVIN-EPSTEIN:

25 Q There are a couple of points on your direct

1
2 Q It says "unspecified personality disorder"?

3 A Yes.

4 Q Did you read the portion of this report
5 where Dr. Schwartz said, "It is my professional opinion that
6 the defendant is not presently insane"?

7 MR. LEITEL: Your Honor, this document is
8 in evidence. The witness has testified that he
9 read the complete document --

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14 and read them carefully. I see no reason for the
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16 document is in evidence.

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18 of the report. All right.

19 MR. LEVIN-EPSTEIN: I am merely trying to
20 establish upon what portion --

21 THE COURT: There is no argument. You can
22 examine as to any portion.

23 MR. LEVIN-EPSTEIN: Very well, your Honor.

24 BY MR. LEVIN-EPSTEIN:

25 Q There are a couple of points on your direct

1 examination which I would like to go back over slightly.

2
3 You testified on direct examination, did you not, that
4 a substantial portion of the information that you had
5 received upon which you based your opinion was derived from
6 the defendant directly, is that correct?

7 A Yes, sir.

8 Q And you said that he told you about things that
9 had happened to him or which had been involved in his test
10 or examination?

11 A Yes.

12 Q An automobile accident, for one?

13 A Yes, sir.

14 Q Various hospitalizations for another?

15 A Yes, sir.

16 Q Possibly he said that he had been -- that he
17 had attempted to operate on himself in some unspecified
18 manner as a doctor?

19 A Yes, sir.

20 Q Did you check with any hospitals in Colombia
21 to see if at any time Alfonso Pineros or Gilberto Amaya had
22 been in any of those hospitals?

23 A No, sir.

24 Q Did you check with anybody in any way in any
25 form, Doctor, to verify what Mr. Pineros had told you?

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A No, sir.

Q And then of course you wrote a written report which has been admitted into evidence, is that correct, Doctor?

A Yes, sir.

Q And isn't it a fact, Doctor, as you testified quite candidly on direct examination that in that report you say at least in one part, and I believe I am quoting this directly now from your report --

MR. LEITEL: Your Honor, before the Government begins, if the Government is going to pick out any sentence or phrase to read, I would insist that the entire document be read to the jury.

THE COURT: No. He may read from any portion of the medical report and examine the doctor as to what he said. This is not the same as any statement. It is not a statement of the witness. All right.

Q (Continuing) Didn't you say in your report -- one moment, Doctor, because I just want to make sure I have got it exactly. Please excuse me for a moment, Doctor, while I find this part I want to question you about -- didn't you say, Doctor, in your report, and I quote:

"...either Mr. Amaya is deliberately lying or he is confabulating and trying to piece together from recollection

1
2 of his experience..."

3 A Yes, sir.

4 Q Didn't you further say, Doctor, "...I tend to
5 lean toward the second possibility, confabulation, because
6 most of the incongruities are not sensible in terms of his
7 present situation and do not seem aimed at ameliorating it..."
8 didn't you say that, Doctor?

9 A Yes, sir.

10 Q Doctor, isn't it a fact then so for all you
11 know he may have been lying to you? Isn't that correct?

12 MR. LEITEL: I object to the form of the
13 question, your Honor.

14 MR. LEVIN-EPSTEIN: I will rephrase it.

15 Q Doctor, he could have been lying to you,
16 couldn't he?

17 A I would say I cannot distinguish how much of it
18 is reality and how much of it is fantasy.

19 Q So it is your testimony that you don't know
20 when he is telling you the truth?

21 A Yes.

22 Q And basically, Doctor, what you said in the
23 statement, isn't it, that either he is lying or he is
24 confabulating, is that right?

25 A Yes, sir.

Rendon-cross

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2 Q Isn't it a fact, Doctor, that confabulation as
3 such is nothing more, Doctor, than an attempt on the part
4 of a person undergoing an examination on interview to fill
5 in gaps in his memory in order to make the entire flow of
6 what he is telling you more real and plausible?

7 A It is an attempt to interpret reality and
8 put reality together.

9 Q Well, Doctor, isn't it a fact that when some-
10 one confabulates as such he is filling in gaps of a story
11 that he is telling with either real or imagined episodes so
12 as to fill out or complete the story?

13 A It is understood that confabulation as a
14 medical term is secondary to brain disorder --

15 Q A brain disorder?

16 A Or thinking disorder --

17 MR. LEITEL: Would the Government allow the
18 witness to complete his answer without interruption.

19 MR. LEVIN-EPSTEIN: I beg your pardon, Doctor,
20 I didn't mean to interrupt you. Continue.

21 A (Continuing) I said it is understood that
22 confabulation in medical terms, it is understood that the
23 patient tries to fill in gaps. For example, I say, "Do you
24 remember me?"

25 The patient says, "Yes," when he never saw me before.

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Q I see. So basically what you are saying is that either Mr. Pineros is lying to you or he is lying to you?

A No, sir.

Q Isn't it a fact, Doctor, that in a confabulation as a syndrome to mental disease or a mental examination is for the most part found when there is a defect in the brain, an organic defect, and it is in fact very rare to find it in an inorganic defect in a disease such as schizophrenia?

A It is mostly found in organic brain difference.

Q Did you detect any organic brain damage in this patient?

A I didn't detect organic brain damage but I understand --

Q No. I'm just asking you whether you found that.

MR. LEITEL: Would the Government please allow the witness to complete his answer.

THE COURT: No, he did not. All right.

MR. LEVIN-EPSTEIN: Very well. Complete your answer.

MR. LEITEL: May the reporter read that back so the witness can complete his answer?

MR. LEVIN-EPSTEIN: I will ask the witness to

complete his answer.

A (Continuing) Yes. I found in the reports that the patient had a visual defect after the car accident, and that visual defect raised the question about brain damage, and as stated by Dr. Abraham Sen the patient still has that visual defect.

Q Did you examine him for this visual defect yourself, Doctor?

A I did not.

Q In your report, Doctor, didn't you say, and I quote Dr. Schwartz, meaning the doctor at Kings County Hospital raised the question of prognosis at a point where he did not have available the information that is present now; didn't you say that?

A Yes, sir.

Q And didn't you continue to say, "According to the present data I do not believe that Mr. Amaya was," and I quote "was" -- I beg your pardon, "has" -- let the record be clear that Dr. Rendon said that Mr. Amaya has a chronic serious mental disturbance of fluctuating severity, perhaps a psychosis, which has responded to medical treatment and has relapsed several times; didn't you say that?

A Yes.

Q What psychosis was that, Doctor?

1
2 A Chronic schizophrenia, in my opinion.

3 Q Chronic schizophrenia?

4 A Yes.

5 Q Doctor, is there a difference between types
6 of schizophrenia?

7 A Yes, sir.

8 Q Will you please tell the jury what different
9 types of schizophrenia there are?

10 A There are many types of schizophrenia that
11 different schools of psychiatry have described. The most
12 agreed upon are, number one, paranoid schizophrenia.

13 Q Paranoid?

14 A When the person is under a false belief, which
15 is a person has a disorder in the content of their thinking --

16 Q Let me interrupt you now, Doctor, it is not
17 your diagnosis that Mr. Pineros is a paranoid schizophrenic,
18 is that correct?

19 A No.

20 Q What is the next form?

21 A Simple schizophrenia.

22 Q Simple schizophrenia?

23 A The person undergoes a progressive deteriora-
24 tion.

25 Q Now, Doctor, it is not your opinion that he has

2 simple schizophrenia, is that correct?

3 A Yes, sir.

4 Q What is the next form of schizophrenia, Doctor --
5 is that your diagnosis, that it is not a simple schizophrenia?

6 A That is not my diagnosis.

7 Q What is the next form, Doctor?

8 A Hebephrenia schizophrenia.

9 Q H-e-b-e-p-h-r-e-n-i-c. Go on, Doctor.

10 A N-i-a. Hebephrenic shizophrenia --

11 MR. LEITEL: Do we have a spelling bee between
12 the witness and the Government?

13 MR. LEVIN-EPSTEIN: I assume that is an objec-
14 tion. I will ask for a ruling.

15 Q Go on, Doctor.

16 A Hebephrenic schizophrenia usually is very
17 immature, very silly, making jokes, and also has other
18 complaints about his body.

19 Q It is not what you diagnose this man as, did
20 you, Doctor?

21 A No.

22 Q What you diagnosed him as, according to what
23 you just said, is chronic schizophrenia, is that correct?

24 A Yes, sir.

25 Q Would that be the same as chronic undifferen-

1
2 tiated schizophrenia?

3 A Yes, sir.

4 Q Would that be the same as a residual schizo-
5 phrenia?

6 A They are not the same.

7 Q They are not the same? Doctor, I quote to you
8 now from the report where you say in the report, and I quote,
9 "It is to be considered" -- I beg your pardon -- withdrawn.

10 "My diagnostic impression at present is residual
11 schizophrenia in a man who has probably had a chronic schizo-
12 phrenic process," isn't that what you said?

13 A Yes, sir.

14 Q Are you changing your mind now, Doctor?

15 A No, sir.

16 Q Is it your testimony that he is now a chronic
17 schizophrenic?

18 A My testimony is that he is a residual schizo-
19 phrenic. I didn't explain that to the jury. May I explain
20 that to the jury?

21 Q We will come to that in a moment.

22 Doctor, have you ever heard of a man named Jay Katz?

23 A Jay Katz?

24 Q Jay Katz, psychiatrist and psychoanalyst,
25 Assistant Professor of Yale Law School?

1
2 A No.

3 Q Have you ever heard of a man named Joseph
4 Goldstein, Doctor, Professor of Law at Yale Law School,
5 Candidate in Psychoanalysis for a degree?

6 A No, sir.

7 Q Have you ever heard of Allen J. Dershowitz,
8 Doctor, Assistant Professor of Law at Harvard Law School?

9 A No, sir.

10 Q Have you ever seen this book which I am now
11 handing to you before?

12 A No, sir.

13 Q You have never seen it before?

14 A No.

15 Q Very well. Have you ever seen this book,
16 Doctor, which I now hand to you?

17 A Yes, sir.

18 Q Would you tell the jury, please, what that
19 book is?

20 A This is the diagnostic and statistical manual
21 of mental disorders which is the official diagnostic guide-
22 line.

23 It doesn't necessarily mean that every psychiatrist
24 makes the diagnosis according to this.

25 (Continued on next page.)

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Q Do you subscribe to the diagnoses on this book, sir?

A Yes.

Q You do.

Would you agree with the diagnostic interpretations and descriptions that appear in this book?

A Some of them.

Q But not all?

A Yes, sir.

Q Would you agree with the diagnostic interpretation of residual schizophrenia in this book?

A Yes.

Q Would you agree it is a category of patients showing signs of schizophrenia, but who following a psychiatric schizophrenic episode are no longer psychotic?

A Yes.

Q Would you agree with this book's interpretation, definition and description of undifferentiated schizophrenia, sir?

A I did not make a diagnosis of differentiated schizophrenia.

Q I misunderstood.

A I said there is a process.

Q That is not a psychosis, if he has a process?

1
2 A It is a long-time process. My diagnosis is
3 residual schizophrenia.

4 Q Tell me, Doctor, would you please examine,
5 if you would, this copy of your report which I now hand to
6 you and point out to me if you would where in that report
7 it says that in November, December of 1973 or in January of
8 1974, Gilberto Amaya or Alfonso Pineros were suffering from
9 a mental disease of such a nature that would make him unable
10 to understand the nature of his acts and --

11 MR. LEITEL: Objection, your Honor. The docu-
12 ments speak for themselves. They are in evidence for
13 the jury to read.

14 THE COURT: You may answer.

15 A I stated in the last -- previous to the last
16 paragraph that it is my opinion after comparing the conver-
17 sation transcripts of four different persons that Mr. Amaya's
18 language reveals substantial impairment of thinking, which
19 cannot be explained only on the basis of lack of command of
20 the English language.

21 Now, the transcripts are dated that you talk about.

22 Q That's where it says he was irresponsible?

23 A Yes.

24 Q Would you agree with the following statement,

25 Doctor:

1
2 The current official classification appears to differentiate eight varieties of adult schizophrenia, three of
3 those varieties we can eliminate at once. The acute undifferentiated type and the chronic undifferentiated type are
4 merely convenient labels for the cases that are difficult
5 to classify. Would you agree with that, sir?
6

7
8 A No.

9 Q Would you agree with this:

10 The same is true of the residual type?

11 A No, sir.

12 Q Doctor, during your direct examination I believe
13 it was your testimony, and the record of course will bear
14 me out if I am inaccurate and it is the jury's recollection
15 that governs, but did you say on direct examination that
16 there are three alternatives with relation to your interview
17 with the defendant:

18 One, that he was lying to you,

19 Two, he was making believe,

20 Or, three, he was lying; isn't that what you said?

21 A No, sir.

22 Q You did not say that?

23 A No, sir.

24 Q Did you say, Doctor, on direct examination that
25 basing your opinion on what he told you there were two

alternatives, lying and fabrication?

A Yes, sir.

Q Didn't you say in that context he was lying or he was making believe?

A I do not recollect saying that.

Q Very well.

Doctor, what is malingering?

A Faking.

Q Doctor, I show you Defense Exhibit J and I direct your attention to this portion of that exhibit --

MR. LEITEL: Would you identify what page?

MR. LEVIN-EPSTEIN: Yes, I will in a minute.

It is the first page of the page marked

"Addendum."

Q Did you read this portion of the report before you arrived at your conclusion?

A Yes, sir.

Q Did you read the second page as well?

A Yes, sir.

Q Did you read where it says there were many other discrepancies found during these repeated interviews?

MR. LEITEL: The question has been answered.

THE COURT: He said he read it.

Q Did you read the portion that I am pointing to

1 (indicating)?

2 A Yes.

3 Q Will you read it out loud --

4 MR. LEITEL: I object.

5 THE COURT: It serves no purpose.

6 MR. LEVIN-EPSTEIN: I believe it does serve a
7 purpose. It is relevant as to the basis upon which
8 this doctor based his opinion.

9 THE COURT: He told us what he based his opinion
10 on.

11 MR. LEVIN-EPSTEIN: It is in evidence and the
12 jury may look at it themselves.

13 MR. LEITEL: Of course.

14 MR. LEVIN-EPSTEIN: Very well.

15 Q Doctor, you said during the preparation of
16 your report and in making up your mind as to what diagnosis --
17 withdrawn.

18 On the conclusion you drew, you reviewed certain
19 transcripts; is that correct?

20 A Yes.

21 Q In fact, those three transcripts were the
22 transcripts which have been marked Government's Exhibits 6, 7
23 and 18; is that correct?

24 I will show them to you.

25

Rendon-cross

(Documents shown to witness.)

A I beg your pardon, this one I didn't review.

MR. LEVIN-EPSTEIN: I meant to say Government's Exhibit 20. I believe you said that you looked at that one?

A I looked at this one. I didn't look at this one (indicating).

Q You did not look at this one?

MR. LEITEL: Which one?

MR. LEVIN-EPSTEIN: Government's Exhibit 6, DEA Exhibit U.

MR. LEITEL: I would ask the doctor to look at it again and see if he had reviewed that.

Q Doctor, I ask you to look at it again and review whether or not you looked at this (indicating)?

A Yes, I did review this. Sorry.

MR. LEVIN-EPSTEIN: That is quite all right.

They are confusing.

Q Doctor, you quoted certain excerpts from various transcripts that you thought significant in arriving at your opinion?

A Yes, sir.

Q I believe you stated that one of the portions that you related to the jury showed illogical thought --

1
2 A Yes.

3 Q -- and illogical and unresponsive answers to
4 questions and so on?

5 A Yes, sir.

6 Q Doctor, let me ask you a hypothetical question:
7 If a man was speaking with another man about a business
8 transaction and the first man said to the second man:

9 "Are you ready to do business?"

10 The second man said, "Yes."

11 Would that indicate to you logical thinking?

12 A No.

13 Q It wouldn't?

14 A Not necessarily in itself. Taken out of
15 context, it is impossible to say.

16 Q Taken out of context, O.K.

17 Doctor, did you read this portion of the transcript
18 (indicating)?

19 MR. LEITEL: The doctor said that he read the
20 entire exhibit.

21 THE COURT: He read it all.

22 Q Let me ask you your opinion of this portion
23 of the transcript, Doctor. This is Special Agent Gray speaking
24 with the defendant:

25 "No, to Grady. Yeah, O.K. I think that's too much.
I think that's an ounce -- no, just a little bit more. O.K.,

1 too much --"

2 MR. LEITEL: Is the Government identifying who
3 is speaking?
4

5 MR. LEVIN-EPSTEIN: I just identified Special
6 Agent Grady.

7 MR. LEITEL: Thank you.

8 Q (Continuing) "--here, let me do it. You are
9 shaking too much. O.K., wow -- wow too much, O.K. That's
10 good enough. Envelope, little envelope. O.K., here. O.K.,
11 Bueno.

12 "This is different, this is Bolivian, this is Colombian,
13 different.

14 "Colombian.

15 "Different, you understand?

16 "Si.

17 "Me say you this is good, this is not. This is Bolivian.
18 This is not good good, Colombian, different."

19 Would that indicate to you an understanding of a logical
20 response to a conversation, sir?

21 A It's not quite logical.

22 Q It is not quite logical.

23 Would the lack of logic in the response -- would that
24 be attributable to a difficulty in understanding English or
25 the language in which they were conversing?

Rendon-cross

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A As I see it, Agent Gray asked him, "Is it Colombian?" And he say it is different.

Q Yes.

A So it is a different answer to the question. There are some incongruencies.

Q Without asking you to interpret the meaning, I am asking you --

MR. LEITEL: Isn't that what the Government is asking this witness to do, to make that interpretation?

MR. LEVIN-EPSTEIN: No, that is not what the Government was asking. The record will bear out what the Government was asking.

Q Doctor, how many times have you examined a patient with the purpose of preparing for testimony at trial?

A This is the first time.

Q Doctor, how many times have you examined a patient with the purpose of answering a question as to whether or not that patient was criminally responsible for his activities at a particular time?

A This is the first time.

Q You have never done it before?

Doctor, how many times have you examined a patient

1
2 psychiatrically, of course, with the intent of determining
3 whether or not he was competent to stand trial in preparation
4 for your testimony?

5 MR. LEITEL: Objection, not relevant to this
6 proceeding.

7 THE COURT: Yes.

8 MR. LEVIN-EPSTEIN: I will withdraw it.

9 Q How many times, Doctor, have you been consulted
10 by other doctors who were going to testify as to somebody's
11 responsibility -- competency to stand trial?

12 A Not once.

13 Q Never?

14 A Never.

15 Q Doctor, you testified that when speaking with
16 Mr. Pineros, during your examination, he indicated good
17 retentive qualities for recent events. He had a good memory
18 for recent events; is that correct?

19 A Yes, sir.

20 Q You also indicated, Doctor, that during your
21 examination of Mr. Pineros he showed difficulty in recalling
22 events that occurred years ago?

23 A Yes, sir.

24 Q Is that abnormal?

25 A Not in itself.

1
2 Q Is that significant to your diagnosis?

3 A In the context of the medical examination and
4 the examination of the documents, yes.

5 Q Did he have difficulty, Doctor, recalling who
6 his father was?

7 A No, sir.

8 Q Did he have difficulty recalling who his mother
9 was?

10 A No, sir.

11 Q Did he have difficulty recalling how his
12 father died?

13 A No, sir.

14 Q Did he have difficulty recalling that his
15 father was a folk doctor of sorts or a self-proclaimed
16 physician or healer?

17 A No, sir.

18 Q He remembered all that, didn't he?

19 A Yes, sir.

20 Q Doctor, can you explain to this jury how it is --
21 withdrawn.

22 Doctor, this morning or last night did you discuss
23 your testimony with Mr. Leitel?

24 A No, sir.

25 Q You have not discussed your testimony with

1
2 Mr. Leitel?

3 A Not this morning or last night.

4 Q You were not present here in court yesterday
5 when Mr. Pineros testified?

6 A No, sir.

7 Q You were not here this morning when he completed
8 his testimony, were you?

9 A No, sir.

10 Q So you do not know what he testified to?

11 A No, sir.

12 Q Were you told by Mr. Leitel or by anyone as
13 to what Agent Kobell testified to?

14 A I was told by Mr. Leitel that he testified
15 yesterday.

16 Q Were you told the substance of the testimony?

17 A No.

18 Q Were you told, Doctor, or did you find out from
19 some other source as to what Agent Gray testified to yesterday?

20 A No, I was not told what he testified to.

21 Q Doctor, have you ever seen Agent Gray before
22 today --

23 MR. LEITEL: Maybe if you would identify Agent
24 Gray --

25 MR. LEVIN-EPSTEIN: That would solve my question.

1
2 This is Agent Gray (indicating).

3 THE WITNESS: Yes.

4 Q -- in order to learn how Mr. Pineros behaved
5 in November or December of 1973 or in January of 1974?

6 A No, sir.

7 Q Did you ask to?

8 A No, sir.

9 Q Did you ask to speak to Agent Kobell?

10 A No, sir.

11 Q Did you think it would be important to get a
12 first-hand description of the defendant's behavior at that
13 time in arriving at your conclusion?

14 A I made my determination based upon the facts
15 that I was given to analyze.

16 (Continued on next page.)
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Rendon-cross

Q Doctor, basically, then -- withdrawn.

Doctor, you are a member of the American Psychiatric Association, are you not?

A Yes, sir.

Q What form of membership do you have in that organization?

A Regular membership.

Q Are there other forms of membership?

A Yes.

Q What other forms are there, Doctor?

A There are fellows, officers.

Q And are there diplomates?

A Yes, sir.

Q And you are not a fellow of the society, are you?

A No, sir.

Q You are not an officer of the society, are you?

A No, sir.

Q You are not a diplomate of the society, are you?

A No, sir.

Q What must one do or accomplish in order to become a diplomate of the American Psychiatric Association?

A To present a Board Examination.

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Rendon-cross

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Q And you have never done that?

3

A No, sir.

4

Q How long have you been a member of the

5

association?

6

A Perhaps two years.

7

Q 1973.

8

Doctor, do you know what Board certification

9

means?

10

A Yes, sir.

11

Q Will you explain to the jury what Board

12

certification means?

13

A It is an examination that consists of two parts and it is a voluntary examination that psychiatrists may submit themselves to. It is not required by the law to practice psychiatry.

17

Q Doctor, are you familiar with the American Board of Psychiatry and Neurology?

18

19

A Somewhat familiar, yes.

20

Q Is it not a fact that the American Board of Psychiatry and Neurology is a medical body of twelve members, if you know?

21

22

23

A I do not know that fact.

24

MR. LEITEL: I object to that, your Honor.

25

THE COURT: He has not passed his boards.

Rendon-cross

He is not a diplomate.

MR. LEVIN-EPSTEIN: This does not have anything to do with being a diplomate.

MR. LEITEL: I object to that question.

MR. LEVIN-EPSTEIN: It goes to the issue of qualification, your Honor.

Q Let us move on:

You are not Board certified?

A I am not.

Q You have only been licensed to practice in New York for two or three years; is that correct?

A Yes, sir.

Q How many patients have you treated for residual schizophrenia with chronic schizophrenic processes?

A I wouldn't be able to tell you a number.

Q More than a hundred?

A I don't believe so.

Q Less than a hundred?

A Yes.

Q More than 50?

A Possibly.

Q Less than 50?

A Possibly.

Q More than 25?

Rendon-cross

A Perhaps. I couldn't tell you.

Q Possibly less than 25 --

MR. LEITEL: Aren't we getting speculative?
The Doctor has answered three times.

MR. LEVIN-EPSTEIN: Each time he answered
"possibly."

MR. LEITEL: The Doctor said he would not be
able to give a precise answer.

MR. LEVIN-EPSTEIN: I will move to another
point. Doctor, did you consider the fact in arriving
at your opinion that other doctors have considered
that this defendant was a malingerer? Did you
consider that fact?

MR. LEITEL: I object to the characterization
of what the evidence says.

THE COURT: I will allow it.

Q You may answer, Doctor.

A I think at Springfield the last interview
the doctor described that he was a malingerer.

Q Did you use that in arriving at your opinion?

A Yes.

Q I suspect you rejected it out of hand?

A I considered it very carefully.

Q Yet you have formed an opinion?

Rendon-cross

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2 A I arrived at a different opinion, which is
3 quite frequent in psychiatry.

4 Q Doctor, I believe you stated just before you
5 completed your direct examination that your opinion was that
6 Mr. Píneros --- and I will try to quote you exactly -- that
7 you could not quite yourself give an opinion as to his
8 mental status or stability at the time in question, but
9 the best you could do is that you had a suspicion of what
10 his mental status was; is that correct?

11 A Is that in my statement?

12 Q No, I am paraphrasing what you just testified
13 to under oath.

14 MR. LEITEL: Are you asking the question, did
15 he state that?

16 MR. LEVIN-EPSTEIN: If that is an objection,
17 I'll ask for a ruling.

18 THE COURT: Did you state that? Did you
19 state a moment ago on direct examination in response to a
20 question by Mr. Leitel, that you could not commit yourself
21 to an opinion as to this defendant's mental status in
22 December and November of 1973 and January of 1974? Did
23 you say that, yes or no?

24 A Yes, sir.

25 Q In fact, you cannot commit yourself to an

1
2 opinion, is that correct?

3 A I cannot submit myself to a definite statement.
4 I can give an opinion, speculative.

5 Q You are speculating?

6 A Yes.

7 Q Another word for speculating is guessing?

8 A Not guessing, putting some amount of informa-
9 tion together and making a hypothesis from it.

10 Q I see.

11 I think you said the best you could do is
12 express an opinion or a suspicion that you had; is that
13 correct?

14 A Yes.

15 Q Doctor, I show you Government's Exhibit 1 in
16 evidence and I ask you, have you ever seen that before
17 (document shown to witness).

18 A No, sir.

19 Q I show you what has been marked as Government's
20 Exhibit 3, 4 and 5 and anything else on this table. Have
21 you ever seen any of this stuff before?

22 MR. LEITEL: I do not know what is on that
23 table. There are maybe 30 different things.

24 THE COURT: What difference does it make?

25 MR. LEITEL: We can stipulate, if the

Rendon-cross

A 113

Government would like, as to what this man has seen and that would be each and every transcript with which this defendant has indicated as being a party to and each and every medical report, two from Springfield and the two from Kings County. I believe that is what you have examined with regard to this accused; is that not so, Doctor?

THE WITNESS: Yes.

MR. LEVIN-EPSTEIN: That satisfies my question as to that point. Thank you.

Q Didn't you say in your report, Doctor, that Mr. Pineros indicated to you that he had described to you two delusions and hallucinations?

A Yes, sir.

Q By that, do you mean that when he told you that he had an hallucination, that he really had an hallucination?

A There are ways of appraising whether the hallucination is true or not.

Q Was it your opinion --

MR. LEITEL: Again, the Government is cutting the witness off.

MR. LEVIN-EPSTEIN: If I am, I apologize.
Continue, please.

1
2 A (Continuing) If a person says that he heard
3 voices inside his mind, that is not an hallucination. If a
4 person says that he heard voices coming from outside, from
5 real persons that are there, even if he is not there -- in
6 other words, that the voices are real, that they exist,
7 those are hallucinations.

8 Q Doctor, you said that Mr. Pineros described
9 to you two hallucinations, right?

10 A Yes, sir.

11 Q And then in the same report you said that he
12 might be lying to you, right?

13 A I didn't say that he might be lying.

14 MR. LEITEL: I object. There is no statement
15 like that in the record.

16 THE WITNESS: I didn't say that.

17 Q Either he is lying to me --

18 THE COURT: Do you mind if I speak? You have
19 gone far enough. You have examined him on every
20 aspect of his testimony. You can keep going over
21 every item --

22 MR. LEVIN-EPSTEIN: I will go on to something
23 else.

24 THE COURT: I know you can find something else.
25 You have examined for an hour and ten minutes. YOU

Rendon-cross

A 115

1
2 have examined him on everything that he said on his
3 direct examination. You keep going back.

4 MR. LEVIN-EPSTEIN: No further questions,
5 your Honor.

6 THE COURT: Anything further?

7 MR. LEITEL: I have no further questions.

8 THE COURT: You may step down, Doctor. Thank
9 you.

10 We have no further witnesses at this time.
11 We will recess until 2:00 o'clock, at which time we
12 will start with a new witness. Do not talk about
13 the case and keep an open mind.

14 (Recess taken.)
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AFTERNOON SESSION

(The following occurred in the absence of the jury:)

THE COURT: All right. Ready?

MR. LEVIN-EPSTEIN: Yes.

THE COURT: Bring the jury in.

MR. LEITEL: Would you prefer that I rest for the record or without the jury?

THE COURT: Yes. You must rest before the jury.

MR. LEITEL: Thank you, sir.

THE COURT: All right. After you rest, then we will go on the side and you will make your motions on the side rather than send them out again.

MR. LEITEL: Yes, sir.

(Jury present.)

THE COURT: All right. Ready to start now? The defendant?

MR. LEITEL: Yes, your Honor. The defendant rests his case.

THE COURT: The defendant rests?

MR. LEITEL: Yes.

THE COURT: I will take the motions.

Stay where you are, please.

(Sidebar follows.)

1 MR. LEITEL: The defendant moves at the end of
2 the entire case for a judgment of acquittal, your
3 Honor.

4 THE COURT: The motion is denied.

5 (In open court.)

6 THE COURT: All right. Now we are ready for
7 the rebuttal part of the case, which will be the
8 Government's part of the case.

9 MR. LEVIN-EPSTEIN: The Government does have a
10 rebuttal case, your Honor, and calls as its first
11 witness Dr. David Abrahamsen.

12 THE COURT: All right.

13 D A V I D A B R A H A M S E N , having been first duly
14 sworn by the Clerk of the Court, was examined and
15 testified as follows:

16 DIRECT EXAMINATION

17 BY MR. LEVIN-EPSTEIN:

18 Q For the record, sir, would you state your full
19 name out loud so all the jurors can hear it?

20 A My name is Dr. David Abrahamsen.

21 Q Are you a doctor of medicine?

22 A Yes.

23 Q Do you have a specialty, Dr. Abrahamsen?

24 A Yes.

25 Q What is that specialty?

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A Psychiatry and psychoanalysis.

Q Psychiatry and psychoanalysis?

A Yes.

Q Doctor, could you tell the jury, please, how long you've been a medical doctor?

A Since 1929, which is about 45 years, I believe.

Q And at that time did you graduate from the Royal Frederick University in Oslo, Norway?

A Yes.

Q Did there come a time following that when you did an internship?

A Yes.

Q Where was that, sir?

A That was at the Royal Norwegian University Clinic in Oslo and later on residence in psychiatry in Oslo, in the community hospital.

Q Following your training in the Royal Clinic of the Frederick University, did there come a time when you were approved in your specialty of psychiatry and neurology?

A Yes, in Norway.

Q Was that in 1938?

A Yes.

Q Did there come a time during 1940 and '41 where you were a psychiatrist on the staff of the St. Elizabeth's

1 Hospital in Washington, D.C.?

2 A Yes.

3 Q And following that time, were you appointed
4 as psychiatrist to the Diagnostic Depot of the Illinois
5 State Penitentiary in 1941 and '42?

6 A Yes.

7 Q Doctor, could you tell this jury how long
8 you've been licensed to practice medicine in the State of
9 New York?

10 A Since 1943.

11 Q During the years 1943 and '44, Doctor, were
12 you in fact a psychiatrist assigned and employed at the
13 Bellevue Hospital Psychiatric Division in New York City?

14 A Yes.

15 Q And following that time, did you undergo a
16 period of study with Dr. Gustave Vyachowski in 1944 through
17 '47?

18 A Yes.

19 Q Did there come a time when you became affilia-
20 ted with the American Board of Psychiatry and Neurology?

21 A Yes.

22 Q And what is that organization, sir?

23 A This is an organization which is set up to
24 accredit various doctors in the field of psychiatry and
25

1
2 neurology.

3 Q I'm sorry, Doctor, continue.

4 A And in order to become a Diplomate you have to
5 go through an examination, which is now both oral and in
6 writing.

7 Q Now, is this sometimes referred to commonly as
8 being Board certified?

9 A Yes, Board certified and being a diplomate.

10 Q Doctor, in what year were you Board certified?

11 A In 1947.

12 Q 28 years ago?

13 A Yes, you are correct.

14 Q During the year 1943, did you become and did
15 you practice as a Research Associate in Psychiatry at the
16 Menninger Clinic?

17 A Yes.

18 Q In 1944 to 1953, were you a Research Associate
19 at the Columbia University Department of Psychiatry?

20 A Yes.

21 Q And directing your attention to 1944 through
22 1948, were you appointed as Doctor in Charge of Research
23 and Treatment of Behavioral Sciences and Disorders in
24 Children and their Families, supported by a grant from the
25 Josiah Macy Foundation?

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2 A Yes.

3 Q Doctor, directing your attention to 1948 through
4 1952, did there come a time when you were appointed Director
5 of Scientific Research at the Department of Mental Hygiene
6 for the State of New York?

7 A Yes.

8 Q And between 1952 and 1955, were you appointed,
9 and did you serve as Director in charge of Research Projects
10 on Child Guidance and Mental Hygiene Facilities Available for
11 the Public Schools in the City of New York?

12 A Yes.

13 Q Following that time, Doctor, in 1948 through
14 1952, is it not a fact that you were the Director of
15 Scientific Research at Sing Sing Prison?

16 A Yes.

17 Q And then later on, in 1953, you became a
18 Chairman of the Research Committee for the Home Term Court,
19 or what is now called the Family Court in New York City?

20 A Yes.

21 Q Doctor, you're curriculum vitae is quite long
22 and lengthy. I'm going to pick what I feel are pertinent
23 parts, if you would just respond to them.

24 A Yes.

25 Q 1929 through 1931, District Public Health

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Officer in Norway?

A Yes.

Q 1938 to 1940, Psychiatrist for the Department of Justice in Oslo, Norway?

A Yes.

Q 1953, a member of the Board of Directors of the Home Advisory Counsel for Family Court in New York City?

A Yes.

Q 1955, a Consultant to the Department of Mental Hygiene for the State of New York?

A Yes.

Q Did you attend a conference as a Delegate from New York State in 1965, Doctor?

A Yes.

Q Where was that conference?

A That was in Washington.

Q Where in Washington?

A Yes, it was in Washington, D.C. At the White House.

Q In fact, was there a conference on education?

A Yes.

Q And in 1957, were you appointed by then Governor Averell Harriman of the State of New York to become a member of the New York State Commission Studying the Question of

Legal Insanity?

A Yes.

Q Did there come a time following the termination of that appointment when you were reappointed?

A Yes, by Governor Rockefeller.

Q And you belong to a number of different medical and professional organizations; do you not, sir?

A Yes.

Q Is one of them the American Medical Association?

A Yes.

Q The American Psychiatric Association?

A Yes.

Q Do you hold any particular form --

A I am a Fellow of it. Pardon me. I am a Fellow of the American Psychiatric Association.

Q Is there a difference, Doctor, between a Fellow and a mere -- a general member?

A Yes. A Fellow -- you become a Fellow of the American Psychiatric Association based upon meritorious service.

Q How long had you been a member of the AMA before you became a Fellow?

A I had been a member -- maybe four years, maybe. Or three years. Something like that.

9 1
2 Q Is it not a fact, Doctor, that you are also
3 affiliated with the New York Society of Clinical Psychiatry?

4 A Yes.

5 Q The New York County Medical Society?

6 A Yes.

7 Q The American Psycho-pathological Association?

8 A Yes.

9 Q The American Society of Criminology and a Fellow
10 of the American College of Psychoanalysts?

11 A Yes.

12 Q Doctor, have you also served as a medical and
13 psychiatric Director of the Foundation for the Prevention
14 of Addictive Diseases?

15 A Yes.

16 Q And on the Board of Overseers for the Lindbergh
17 Center for the Study of Violence at Brandeis University?

18 A Yes.

19 Q And in fact, in 1969, didn't you serve as a
20 Research Consultant in Psychiatry for the Department of
21 Psychiatry at Roosevelt Hospital?

22 A Yes.

23 Q Doctor, have you published any works?

24 A Yes.

25 Q Would you estimate for the jury approximately

1
2 how many books you have written?

3 A I have written, I believe, about ten books.

4 Q Approximately how many articles or treatises
5 of yours have been published?

6 A It can be possibly 25, 30.

7 Q In fact, isn't it a fact, Doctor, that at
8 this very moment, you are currently in the process of
9 completing another book?

10 A Yes..

11 Q Are some of the books as follows, Doctor?
12 Did you write Crime in the Human Mind?

13 A Yes.

14 Q Did you write The Mind and Death of a Genius?

15 A Yes.

16 Q Did you do a report submitted to Governor
17 Thomas E. Dewey on 102 Sex Offenders at Sing Sing Prison?

18 A Yes.

19 Q Did you write a book called Who are the Guilty,
20 The Study of Education and Crime?

21 A Yes.

22 Q And a book called The Psychology of Crime?

23 A Yes.

24 Q And a book called Our Violent Society?

25 A Yes.

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2 MR. LEITEL: Can we stipulate to the expertise
3 of this gentleman, so as to avoid this type of --

4 THE COURT: You will stipulate that the Doctor
5 is qualified to testify as to conditions, psychiatric
conditions?

7 MR. LEITEL: Can you then move on?

8 MR. LEVIN-EPSTEIN: Very well.

9 The list does go on, your Honor.

10 BY MR. LEVIN-EPSTEIN:

11 Q Doctor, are you actively engaged in the practice
12 of psychiatry and psychoanalysis at this time?

13 A Yes, one may say that.

14 Q During the last 40 odd years, Doctor, could
15 you estimate for this jury approximately how many people you
16 have examined with a goal towards forming an opinion as to
17 their criminal responsibility at the time of alleged offenses
18 of a criminal nature?

19 A It could be -- during the last 40 years, you
20 mean?

21 Q In the history of your experience and your
22 profession?

23 A That is impossible to estimate. I cannot say
24 that because I've been working in various hospitals, in
25 prisons and in the courts. It would certainly be several
hundred people.

GR/rp
lpmr2

1 1 Abrahamsen - direct A 127

2 DIRECT EXAMINATION

3 BY MR. LEVIN-EPSTEIN (Cont'd):

4 Q All right.

5 Doctor, have you testified on previous occasions
6 during the course of your career as an expert witness?

7 A Yes.

8 Q Would you tell the Jury approximately how many
9 times you have testified as an expert witness in the field
10 of psychiatry?

11 A Oh, it could be during the years, it could be
12 at least -- well, it could be possibly a hundred times.
13 Maybe.

14 Q On each time, did you qualify as an expert?

15 A Yes.

16 Q Doctor, considering the number of times you have
17 testified, could you estimate for the Jury approximately
18 how many times you've testified on the issue of criminal
19 responsibility of a person accuse of a crime?

20 A Many times. I cannot estimate exactly.

21 Q Well, let me ask you this question, doctor.

22 Has there ever come a time when you have testi-
23 fied on the issue of criminal responsibility, where you have
24 made a determination and formed an opinion that the person
25 to whom you -- your examination was directed was criminally

2 Abrahamsen - direct

irresponsible?

MR. LEITEL: I object to that, your Honor.

No relevance.

This man has made any private determination as to another defendant in another matter as to that defendant's responsibility?

THE COURT: Yes, as to a reference to any other defendant, that would be improper.

MR. LEVIN-EPSTEIN: This was intended, your Honor, as background.

THE COURT: If he made examinations for that purpose, you may ask him that.

MR. LEVIN-EPSTEIN: Very well, your Honor.

BY MR. LEVIN-EPSTEIN:

Q Doctor, let's move along right to the point then. During the course of your --withdrawn.

I ask you to direct your attention to the gentleman sitting at the defense counsel's table there in the blue polo shirt, and I ask you have you ever see that man before?

A Yes.

Q Did there come a time when at the behest of a Court order, from Judge Costantino, you had occasion to examine him on the issue of criminal responsibility?

3 Abrahamsen - direct

A Yes.

Q Where did that examination take place, sir?

A It took place in my office, here in New York City.

Q And do you know on what date that examination took place?

A It was on July 21st, this year, 1975.

Q Did you have occasion to interview and examine the defendant?

A Yes.

Q Would you please tell the Jury the circumstances surrounding the interview and examination and what transpired?

A I examined him. He did not speak very well English, so I had an interpreter who spoke Spanish and understood Spanish.

Q Let me interrupt for a moment, doctor.

Was that interpreter in fact the same gentleman sitting there now interpreting, Mr. Boyne?

A Yes.

Q Go on.

A But before this examination, I had also studied a great many documents, papers, and seen video tapes and heard recordings about this particular case.

A 130

Q Let us be more specific about that, doctor.

Directing your attention -- may I have the defense exhibits?

Doctor, I show you what has been marked as Exhibits K. J, I and H and L. I'm sorry.

A Yes.

Q I ask -- go ahead.

I ask you, have you had occasion prior to your examination of this defendant to examine those documents?

A I have read and studied these reports from Kings County Hospital Center dated February 19, 1975, and from the Bureau of Prisons Medical Center for Federal prisoners dated November 18, 1974, and another report dated April 17, 1974, and a report from Kings County Hospital, January 5, 1973, and a report from Dr. Marrio Rendon, dated July 23, 1975.

I have also studied and read other reports.

Q Doctor, I was about to ask you whether or not you had ever seen what has been marked as Defendant's Exhibits F and also G.

A Yes, I have seen this report from Dr. Escobar in Colombia, Bogota, Colombia, and I have read it in English, not in Spanish.

Q Doctor, have you also had occasion to examine what has been marked as Government's Exhibit 20?

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Abrahamsen - direct

A 131

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2 A Yes.

3 Q 18?

4 A Yes.

5 Q 16?

6 A Yes, I think so.

7 Q Seven?

8 A Yes.

9 Q And six?

10 A Yes.

11 Q And were these all examined and evaluated by
12 you prior to your examination of the defendant?

13 A Yes.

14 Q Now, doctor, what I have just shown you are tran-
15 scripts of tapes.

16 Did there come a time prior to your examination
17 or subsequent to your examination of the defendant, Mr. Pineros,
18 when you had occasion to review and listen to each and every
19 one of those tapes?

20 A Yes.

21 Q And did you listen to them at the Drug Enforce-
22 ment Administration agency office on West 57th Street?

23 A Right.

24 Q Now, doctor, during the course of your examina-
25 tion, have you also been able to examine and review certain

A 132

6 Abrahamsen -- direct

reports of the investigating agents in this case?

A Yes.

MR. LEVIN-EPSTEIN: May this be marked for identification, your Honor?

THE CLERK: Document marked for identification as Government's Exhibit 29.

(So marked.)

MR. LEVIN-EPSTEIN: Thank you.

BY MR. LEVIN-EPSTEIN:

Q I show you what has been marked as Exhibit 29 for Identification, doctor, and I ask you if you've ever seen these documents before?

A Yes. Not only have I seen them, but I have read them, too.

Q And did you consider these in part of your examination and evaluation of the patient or the defendant?

A Absolutely.

Q Doctor, during the course of your evaluation and preparation for making a determination as -- pursuant to this Court order, did you have occasion to view and to observe certain video tapes or television?

A Yes.

Q And did you observe two video tapes?

A Yes.

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Abrahamsen -- direct

A 133

Q And was this also part of the efforts that you were making when you visited the Drug Enforcement Administration?

A Yes.

Q Did you hear the tapes at that time?

A Yes.

Q Did you have occasion, doctor, to compare the transcripts to the tapes?

A Yes.

Q Doctor, I show you what has previously been marked as Government's Exhibit 27 for Identification, and I ask you if during the course of your preparation for this testimony, you've had occasion to examine those documents?

A Yes.

Q And have you evaluated them?

A Yes.

Q I also show you, doctor, what has been marked as Government's Exhibit 28 for Identification, and I ask you if you had occasion at a prior time to review and evaluate those documents?

A Yes.

Q Now, doctor, during the course of the period of time that you were at West 57th Street, at the DEA headquarters, when you saw the tapes, or rather heard the tapes and saw

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Abrahamsen - direct

A 134

2 the video tapes, did you meet with Special Agent Kieran Cobell?

3 A Yes.

4 Q Did you meet with Special Agent Michael Grey
5 sitting here?

6 A Yes.

7 Q Did you have occasion to discuss with them
8 their investigation and this case?

9 A Yes, in great detail.

10 Q And following all this, doctor, did there come
11 a time when you interviewed and examined the defendant,
12 Alphonso Pineros?

13 A Yes.

14 Q Would you please describe for the Jury the
15 circumstances of that examination and evaluation?16 A He was -- the defendant was interviewed by me
17 in my office, and he was accompanied by two Marshals and
18 present also was the interpreter.19 The defendant did not speak well English and was
20 trying to explain as well as he could or as poorly as he could
21 the -- his youth, his childhood.22 He also mentioned to me an accident which had
23 taken place and which was an automobile accident and where
24 he had been very hurt and he had been sick for a long time.

25 He was quite vague about certain events in

9 Abrahamsen - direct

A 135

his life and that was in particular with regard to November, December, 1973, and January, 1974.

I asked him about his previous life. He was not quite sure about when he, for instance, had come to New York.

He complained about that his memory was very poor, and he had not gone very far in school, only to the third grade or so.

He said that he speaks English -- speaks Spanish quite well. He mentioned, among other things, that he had been for some time in Puerto Rico and then gone to Mexico and then to Colombia.

He isn't quite sure about when he came to New York. Possibly it was in 1972, if not earlier. I then asked him about why he was here, in my office. I asked him also about his offense and he really didn't understand -- understand why they arrested him.

Q Is that what he told you, doctor?

A Yes. I asked him then whether he knew a man by the name of Rodriguez and he didn't know this man. I then tried to talk with him about the agents who had sold him cocaine valued to about \$4,000.

Q The agents that had sold him cocaine, or --

A Pardon me. No. That he had sold -- no. That

10 Abrahamsen - direct

the agents had bought cocaine.

Q I see.

A Valued at \$4,000, but he didn't remember anything of that, and there were various other things also he didn't remember.

It seemed to me here after this examination, and after also having studied all the reports from the various hospitals, that he really didn't want to tell what had happened with regard to the offense.

Q Now, doctor, you say he didn't really want to tell. Does that suggest that he was capable of telling you?

A I believe that he was evasive and that he certainly remember it. Of course he complained about -- that he had had a terrible accident on his head and had been very sick.

However, it is my experience that even after an accident, which lost -- which took place I think three years before this -- his present alleged crime, that certainly one doesn't get such a solid, massive amnesia as this man presented to me, that he does not remember anything about this -- that he was in touch with these agents and that these agents bought from him -- bought from him cocaine.

It was in order to really find out what kind of a mind this man had, because it was my impression from

11 Abrahamsen - direct A 137
the examination that this man was quite smart. He wasn't
such a dumbbell. He was quite smart, and when I saw the
video tape --

Q Of what significance did the video tape play in
your impression, doctor?

A It showed here that we are dealing with a man
who was very coherent. He talked and he smiled. He was very
active. He was not stupid at all and he certainly didn't
have amnesia.

 He was -- he acted quite normally in the course
of business, trying to do business with the agents. There
was nothing mentally wrong with him, as far as I was able
to see.

Q Now, this is at the time that you were viewing
the video tapes that you are talking about?

A Yes.

Q Doctor, you say that you have had occasion and
the opportunity to listen to the various verbal tapes as well?

A Yes.

Q Now, of what significance were they in making
you have the impression that you have?

A Well, it turns out that these tapes did show
that the man answered most of the questions in a very coherent
way. There was no incoherence, no doubt about what he said
and what the answer was.

12

Abrahamsen - direct

A 138

Q Doctor --

A I would like to say this, though.

Q Please.

A During my physical examination, there was a sequella of his accident, in that the eyesight on the right, right, both and the left eye is somewhat limited but that was all that I did find but then also I think it should be fair to state that when I was examining, for instance, his physical power, in the right, in the left hand, in the right and the left foot, and the -- he didn't really use his power which I thought he had.

Now, of course, he had quite many scars on his -- over his body. But reading the report from -- from the hospital in 1971, it showed that -- there that he had fractures of the left foot and right leg and right forearm and some of these scars could have very well come from that and not from anything else.

Q Doctor, during the course of your reading of these various documents that were provided to you, did there come a time when you were shown and when you read about which has been marked as Government's Exhibit 1, which I will tell you has been identified as a note that was passed by the defendant to Special Agent Cobell on November the 29th of 1973?

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Abrahamsen - direct

A 139

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2 A Yes.

3 Q Now, doctor, if a man in these circumstances
4 as has been described -- by the way -- withdrawn.

5 Doctor, has there come a time after each day's
6 trial testimony in this case where you've spoken with me by
7 telephone?

8 A Yes.

9 Q And have I informed you of the content and
10 substance of what each witness testified to?

11 A No. Not very much, I don't remember.

12 Q Did we discuss the fact that the defendant
13 had testified?

14 A Yes, that's right.

15 Q All right.

16 Doctor, based upon your evaluation and these
17 various and sundry other factors which you have considered,
18 the fact that a man, the defendant, secretly handed a paper
19 with a name and phone number to the agent in the manner
20 described in the reports and in the testimony, of what signi-
21 ficance is that to you in forming your impression as to the
22 man's responsibility?

23 A It certainly shows that this man knew exactly
24 what he was doing, that he was trying to do business, that he
25 was able to write his name, the address and -- not the address

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Abrahamsen - direct

A 140

but the telephone number and that certainl he had all the mental powers necessary to do what he set out to do.

Q Doctor, if this man suggested a meeting place and then after another person to whom he was speaking suggested a different meeting place, and the man Pineros then agreed to the alternative meeting place, to have a conversation, would that indicate to you an awareness and would that affect your impression as to his criminal responsibility at that time?

MR. LEITEL: Objection, your Honor.

THE COURT: You are talking at that time?

MR. LEVIN-EPSTEIN: Yes, I am.

THE COURT: I'll allow it at that time.

MR. LEITEL: My objection was to the point that your Honor -- I don't believe that the hypothetical is supported or characterized by the evidence in this case.

The conversations as to meetings were with Rodriguez and not with this defendant.

MR. LEVIN-EPSTEIN: Your Honor, I believe --

THE COURT: With both. All right. I'll allow it.

MR. LEVIN-EPSTEIN: I'll repeat my question, doctor.

15

Abrahamsen - direct

A 141

THE COURT: You remember the question?

THE WITNESS: Yes.

THE COURT: He knows the question.

THE WITNESS: You don't need to repeat the question.

BY MR. LEVIN-EPSTEIN:

Q Very well.

A I am hopeful that I am intelligent enough to understand what you say.

THE COURT: That's right. I agree with you.

THE WITNESS: Thank you, your Honor.

Q I'm sorry, doctor.

A It could very well be that the defendant possibly was a little afraid that he might be discovered in one place or another but it shows that he certainly was aware of the situation, what he was trying to do.

(Continued on next page.)

NS fols.

Abrahamsen-direct

Q Doctor, the evidence has been further that Mr. Pineros accompanied special agent Gray to a particular apartment in Queens in order to show him the apartment and, in fact, did show him the layout of that apartment during December of 1973.

Of what significance is that in your diagnostic interpretation, sir?

A It shows that the man was very much aware of the situation. He certainly was in complete possession of his mental powers, that there was no psychoses or anything like that.

Q No psychoses?

A Not at all.

Q The evidence has shown that Mr. Pineros suggested a method in dealing in cocaine, an agent and Mr. Rodriguez would wait at one location for the exchange of money, and Agent Gray and Mr. Pineros would go to another location to distribute the cocaine.

Would that be of significance in your opinion?

A He would be very cautious and knew what he was doing. It was a well conceived plan. In such a plan you are not psychotic or insane.

Q The evidence showed that in an automobile in which Special Agent Gray and Mr. Pineros participated, Mr.

1
2 Pineros showed to Special Agent Gray a number of
3 identification cards bearing the name "Alfonse Pineros,"
4 when he now claims his true name is Gilberto Amaya --

5 MR. LEITEL: I object to the form of the
6 question.

7 THE COURT: Yes.

8 MR. LEVIN-EPSTEIN: I will rephrase it.

9 Q The defendant showed to Agent Gray a card
10 bearing the name Alfonso Pineras. Would the use of an
11 alias affect your impression or be significant in any way?

12 A No, it would not.

13 Q It would not?

14 A No.

15 Q The evidence has shown that Special Agent
16 Gray accompanied Mr. Pineros to this apartment in Queens
17 and there was some elaborate discussion and the weighing
18 of certain weights to get them right and the testing of
19 the substance to be sold and as you knew from listening
20 to the tapes, that Mr. Pineras participated. Of what
21 significance would that behavior pattern be to you?

22 A It did show certainly that Mr. Pineras was
23 absolutely sane, that he knew what he was doing.

24 Q Doctor, are you familiar with the phrase,
25 "malingering?"

1
2 A Yes.

3 Q What does it mean?

4 A It means really to fake symptoms which are
5 not there, either to fake or to exaggerate symptoms.

6 Q Does "Malingering" come into your diagnostic
7 impression of your evaluation of this patient?

8 A I believe so, yes. I think this man is
9 trying to show that he is psychotic or insane and is trying
10 to produce symptoms that are not there.

11 As a matter of fact, I wouldn't say the same
12 findings, but similar findings, seem to have been made at
13 the Medical Center for Federal Prisoners, where he was
14 examined.

15 Q Doctor, based on all of what we have discussed,
16 your evaluation of the physical evidence, your examination
17 of the tapes, your observations of the video tapes, your
18 personal psychiatric and physical examination of the
19 defendant, your review of the reports, the medication given,
20 the psychological background data, and everything that
21 you have seen in this case, doctor, have you been able to
22 form an opinion based upon your professional expertise as
23 to whether or not the defendant sitting here in court
24 today at the time in November, December of 1973 and
25 January of 1974, was suffering from a mental disease or

defect at that time?

A Yes.

Q What is your opinion, sir?

A Defendant did not suffer from any mental disease or defect at that time and he did not lack substantial capacity to know or to appreciate the wrongfulness of his conduct or to conform his behavior to the requirements of the law.

MR. LEVIN-EPSTEIN: Thank you, doctor.

No further questions.

THE COURT: You may examine.

MR. LEITEL: May we have a two minute recess to prepare?

THE COURT: Yes, we will take a short recess.

(Recess taken.)

THE COURT: All right, you may proceed.

MR. LEITEL: Thank you, your Honor.

CROSS EXAMINATION

BY MR. LEITEL:

Q Doctor, I believe you testified on direct examination that you examined this defendant with the aid of an interpreter; is that correct?

A In part, yes.

Q Do you speak Spanish yourself, sir?

1
2 A I know only three words.

3 Q Have you ever had the opportunity to visit
4 Colombia, the country of this man's origin, or any other
5 country in Central or South America?

6 A No.

7 Q Sir, do you --

8 A I talked with quite many people from South
9 America in English.

10 Q Sir, do you think that a psychiatrist, in
11 your opinion, is substantially benefitted by the opportunity
12 of conversing, communicating with a patient in his own
13 language, with the knowledge of his background and
14 heritage and culture?

15 A I think that a psychiatrist, to some extent,
16 is handicapped by not knowing his country and background.
17 That may be so, yes.

18 Q How about his language, sir?

19 A And, of course, his language, which represents
20 something, although I would say this to you:

21 Since you bring up language, on my part there
22 was no room for misunderstanding what this man told me even
23 though it was through an interpreter.

24 Q Are you of the opinion that in addition to the
25 exact words this man said to you through an interpreter,

1
2 there are the nuances -- how words are said -- which
3 particular words are used to reflect a particular thought,
4 that that something would be lost through an interpreter?

5 A I think theoretically you may be correct,
6 but when it comes down to brass tacks, I think the substance
7 of the interview is not lost.

8 Q Sir, you have had the opportunity, I believe,
9 to review defendant's exhibit F, which is a report from the
10 neuro-surgeon in Colombia.

11 Obviously he did it in English?

12 A Yes.

13 Q If you will remember on that report, there
14 was an indication under the diagnosis area that there had
15 been a fracture of the left foot. Do you remember that,
16 sir?

17 A Yes.

18 Q Now, I believe you also testified on direct
19 examination that you had the opportunity to physically
20 examine this defendant?

21 A Yes.

22 (continued next page.)
23
24
25

2 CROSS-EXAMINATION

3 BY MR. LEITEL (Cont'd):

4 Q You examined his left leg, sir?

5 A Yes.

6 Q From the thigh area to the foot area, sir?

7 A No. I saw the left leg, yes, and saw the scars
8 above there.

9 Q Doctor, are you of the impression what is
10 described is a fracture of the left foot could have
11 caused the scarring on this man's leg?

12 MR. LEVIN-EPSTEIN: I am going to object.

13 The doctor is qualified as a psychiatrist.

14 THE COURT: Yes, as a psychiatrist, not a medi-
15 cal doctor.

16 Q You are a medical physician as well?

17 A Yes. But I am not a specialist in orthopedics.

18 Q Doctor, do you feel from your examination and from
19 your experience that you are in a position to make the
20 determination -- may I finish my question, please -- whether
21 you are in a position to make a determination whether the scars
22 envisioned from the thigh to the foot were caused by a
23 fracture to the left foot?

24 Do you feel you are in such a position?

25 MR. LEVIN-EPSTEIN: Same objection.

THE COURT: He didn't say that he was. I will sustain.

He says he is not an orthopedic specialist.

Q Would you feel there is any significance or would it in any way affect your diagnosis of this gentleman if you had known or if you had been told that those injuries from the thigh to the foot had been self-inflicted?

A If my opinion would be changed?

Q Would be affected by that knowledge?

A No.

Q It would not be?

A No.

Q So it would therefore be irrelevant to your diagnosis?

A I would not say irrelevant. There are so many facts in this particular case whatever happened with his feet or with his foot and the scars really does not have much bearing on the actual case.

MR. LEITEL: Thank you, sir.

Q Doctor, you have also I know seen these reports -- the various reports in evidence. I refer specifically to defendant's Exhibit I, which is a report from the medical center for Federal prisoners dated April 17th of 1974.

You have had the opportunity I believe to examine

and study this report, have you not, sir?

A Yes.

Q I would like to direct your attention specifically to the last page of that report which is a report of psychiatric staff examination, the date is the 2nd day of April of 1974.

A I am sorry, the 2nd day of April of --

Q '74, sir.

You have had the opportunity to examine that, haven't you, sir?

A Yes.

Q Doctor, what it says in this report that he is taking the following medication, and it indicates the Stelazine, 20 milligrams twice a day, and Cogosine, two milligrams twice a day.

Would you describe what Stelazine is and what it is used for?

A Well, this is the old question and I should be happy to answer it.

Stelazine is a medication, a drug, which is used very often in patients who may be thought to have -- may be mentally disturbed and upset to the point where they possibly might go psychotic or also might be used when people do suffer from depression.

Q Doctor, would you please explain as well what

Cogogine is?

A It would be used -- this is another medication as a tranquilizer.

Q Doctor, do you place any significance to the fact that four months after this man's arrest -- four to five months after these alleged occurrences, these sales of cocaine, that the doctors thought it necessary or advisable for whatever reason at a Federal hospital to continue this man on twice a day, on Stelazine and Cogogine, drugs used in the treatment of psychotics?

A Could you kindly repeat your question? I don't follow you.

MR. LEITEL: Mr. Reporter, would you please read back the question?

(Question read.)

A I would say -- I would not pay too much attention to the fact here that this patient had been given or this defendant had been given Stelazine four months after the alleged crime.

I would not pay too much attention to it, because this is a man who can play up very well his symptoms, I believe, and as it has turned out also facing the charges which he was aware of, he certainly was depressed.

Q Doctor, I refer you now to Defendant's Exhibit E

Do you place any importance on the fact that the conclusion of the psychiatrist in the Downstate Medical Center was that "It is our professional opinion that the course of his psychosis, the defendant is unable to understand the proceeding against him"?

A In view of what I have seen about this man
ally, I do not place much importance to it, I'm sorry

(Continued on next page.)

HS?nc

2pm3 2

CROSS-EXAMINATION

BY MR. LEITEL: (Cont.)

Q You don't place much importance on what the doctors at Downstate found one month later and you don't place much importance on what the doctors at Springfield Medical Center chose to treat him with four months thereafter?

A I must tell you one thing. I don't think you can be that general. I don't mean to criticize you. It is here written in the second report, without any knowledge of this man's past history it's impossible for us to make a meaningful prognosis.

If this is acute reaction to having been arrested on serious charges, the man may recover in a reasonable period of time. It means that he had an acute reaction after he was arrested and not before when he did the alleged crime.

Q Doctor, in your reports, did you not state that this patient shows no evidence of any present symptoms of ' thought disorder, perceptual or effective disturbances and there are no residual defects to suggest a prior psychotic isode detected?

A If this in in reference --

Q May I show you your report.

A That is in reference to another report.

Abrahamsen - cross

A 154

1 2

2

THE COURT: What's your answer?

3

4

THE WITNESS: What you said here -- what you
stated here is a report from the Medical Center. It
isn't my words.

5

6

7

Q Do you believe, sir, in your words and analysis
that this man has never undergone any episodes of psychosis?

8

9

MR. LEVIN EPSTEIN: May we have a time as to
that?

10

11

12

13

14

THE COURT: I will sustain the objection unless
you place a time on it. We are not interested in
what he did before. We are concerned whether he
understand the nature of the acts he committed on the
dates in the indictment.

15

16

17

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Q In making a determination as to the man's
responsibility at that time, is it significant and relevant
to know and discuss periods of psychosis either prior to
the alleged time or subsequent thereto?

19

20

21

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A It depends upon the case.

Q Doctor, you cannot say generally that in deter-
mining in any one given day a man's mental responsibility,
that periods of psychosis of psychotic behavior before or
after that particular day, you can't say generally that such
periods would be relevant?

A I think it could be relevant under certain

1 3

2 conditions, yes.

3 Q Doctor, do the reports that you have read from
4 Kings County, from Springfield, do they indicate in the
5 opinion of those doctors, psychotic behavior on the part
6 of this defendant?

7 MR. LEVIN-EPSTEIN: I am going to object.

8 The evidence speaks for itself.

9 MR. LEITEL: This doctor --

10 THECOURT: He can answer. Same rule goes
11 for you as well as for him.

12 Q Would you answer my question, if you remember?

13 A Could we have it read again?

14 MR. LEITEL: Would you read the question back,
15 please.

16 (Record read.)

17 THE WITNESS: Yes, the first report, yes.

18 Q Doctor, if I may continue, please.

19 You stated, I believe, on direct examination
20 that in your opinion the type of trauma, the type of fractures
21 I believe that are described in the reports from Colombia
22 that this man incurred in May, June of 1971, I believe it was
23 your testimony that you didn't believe that could be the
24 cause or effect -- present signs or indication of amnesia
25 for the question.

1 4

2 A Yes.

3 Q Doctor, did this man relate to you the sub-
4 stance of an alleged attack upon his person just prior to
5 Christmas of 1973 in which he suffered an alleged injury to
6 his head?

7 A Yes, I think he mentioned something to that
8 effect.

9 Q Did you consider that, Doctor, as having any
10 effect upon his condition?

11 A No.

12 Q Is that because, sir, you discounted it as
13 just fiction or a product of his imagination?

14 A It could possibly could be a very beautiful
15 produce of his imagination.

16 Q And because you believed that you chose not
17 to consider that in your diagnosis?

18 A I do believe that there were some facts
19 without quotation marks.

20 Q If possible and I know it's difficult in this
21 area of testimony, if possible, I would appreciate a yes or
22 not answer if it's possible, to the type of question that
23 I am asking you, sir.

24 You did not then consider that at all in your
25 diagnosis; is that correct?

A No, yes.

Q Thank you.

You indicated, I believe, on direct examination as well that -- I believe I am characterizing your words correctly -- what you said is what the jury remembers which counts -- this man was vague as to the events of November of '73 and January '74, did you testify to that?

A Yes.

Q Doctor, in your interview and analysis of this patient did you find that the only periods of recall that he had difficulty with were those periods of time?

A He had some other instances that he didn't remember.

Q So it was not only in particular with regard to the events of the time in question that he had difficulty with; is that correct?

A No, it is not correct, I am sorry to disagree with you or very happy to disagree with you, because I do believe that this man was playing that he didn't remember this and didn't remember that so that he didn't remember what happened in November, December and January.

Q Whether or not this man was malingering or faking or whatever your analysis would be, he indicated in particular lack of recall as to areas other than or time

6

Abrahamsen - cross

periods other than the periods in question?.

A Yes. Well, not time periods, certain events and certain things, yes.

Q Thank you, sir.

Doctor, in the study and analysis that you have done in the interviewing, did you find it pertinent or did you believe it advisable to make any long distance phone calls to Colombia and did you speak to the neurosurgeon and the director of the Forensic Institute in Colombia?

Did you find it advisable to do that?

A Yes, and I am glad that you raise that question. I was thinking of it. It was very much in my mind to do so.

However, in my examination I did find that his memory in certain areas -- in the area of being able to remember numbers, backwards and forwards, this is a very difficult thing to do when you have real amnesia.

When you have that, then I thought it was very, very superfluous to spend my money to call this doctor.

Q Because in your opinion what your training has indicated, because this man could add frontwards and backwards or do whatever other scientific test that you put to him, you thought it was not necessary or advisable to do any further investigation with regard to the injuries or

period of hospitalization or medication or anything else that had occurred in Colombia; is that correct?

A I would not say so. I was, of course, very interested in it, but when I read this man, who was supposed to come back to controls after 1972, he didn't show up at any hospital at all, which means this man was doing very well, indeed, so then I didn't think it was necessary for me to call.

Q Are you saying because a man didn't go back to a hospital that that is an indication in your professional opinion that he was well; that is what your statement is?

A Look, young man, if he had been sick he would have gone back to a hospital. If he doesn't remember and has something wrong with his memory, of course, this may be one of the things that brings a person to a hospital.

Q Is it because of his illness, that because of his illness he fled the country on one of his many trips?

MR. LEVIN EPSTEIN: Your Honor, I will object.

THE COURT: Sustained. Too speculative.

Q Doctor, I will just leave you with one last question: I know it's difficult. You are a professional and been a highly reputed member of your profession for many years. Sir, in this year, 1973 --

A '74.

THE COURT: You'd better move on.

1 8

Abrahamsen - cross

2 Q In this year, 1975, could you tell me, please,
3 on how many separate occasions you have had the pleasure
4 of testifying on behalf of the United States Government?

5 MR. LEVIN-EPSTEIN: Objection, same reason
6 stated by counsel when I asked the question.

7 THE COURT: I will allow this. You may
8 answer.

9 A This year?

10 Q Just this year?

11 A Oh, possibly maybe three times at the most.

12 Q Sir, were you in this same courtroom recently?

13 A Yes.

14 Q Testifying --

15 MR. LEVIN-EPSTEIN: Objection, totally
16 irrelevant.

17 THE COURT: Yes.

18 MR. LEITEL: I have no further questions.

19 MR. LEVIN-EPSTEIN: I have no questions on
20 redirect.

21 Thank you, Dr. Abrahamsen.

22 THE COURT: Thank you.

23 MR. LEVIN-EPSTEIN: That completes the
24 Government's case.

25 THE COURT: I will hear you at side bar.

Comm: 1/10/74
Viol. Narc. laws

REPORT OF MEDICAL EXAMINATION

A 161

1. LAST NAME—FIRST NAME—MIDDLE NAME PINEROS, Alfonso		2. GRADE AND COMFORT OR POSITION Inmate		3. IDENTIFICATION NO. 80054-158	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State) 37-55 79th Street, Queens, New York		5. PURPOSE OF EXAMINATION Primary Physical		6. DATE OF EXAMINATION 1/11/74	
7. SEX M	8. RACE W	9. TOTAL YRS. GOVT. SERVICE MILITARY CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE Justice		11. ORGANIZATION UNIT Du-Prisons
12. DATE OF BIRTH 11/12/38	13. PLACE OF BIRTH Puerto Rico		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN Maria Pineros (mother) Calle Olimpo 605, Santurce P.R.		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS Fed. Detention Headquarters, New York			16. OTHER INFORMATION		

17. RATING OR SPECIALTY		TIME IN THIS CAPACITY: TOTAL		LAST SIX MONTHS	
CLINICAL EVALUATION		NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)			
NORMAL	ABNORMAL	(Check each item in appropriate column; enter "N.E." if not evaluated)			
X		18. HEAD, FACE, NECK, AND SCALP			
		19. NOSE			
		20. SINUSES			
		21. MOUTH AND THROAT			
		22. EARS—GENERAL (Int. & ext. canals) (Auscultatory under items 70 and 71)			
		23. DRUMS (Perforation)			
		24. EYES—GENERAL (Visual acuity and refraction under items 69, 60, and 61)			
		25. OPHTHALMOSCOPIC			
		26. PUPILS (Equality and reaction)			
		27. OCULAR MOTILITY (Assess parallel movements, nystagmus)			
		28. LUNGS AND CHEST (Include breasts)			
		29. HEART (Turn, size, rhythm, sounds)			
		30. VASCULAR SYSTEM (Varicosities, etc.)			
		31. ABDOMEN AND VISCERA (Include hernia)			
		32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Preside if indicated)			
		33. ENDOCRINE SYSTEM			
		34. G-U SYSTEM			
		35. UPPER EXTREMITIES (Strength, range of motion)			
		36. FEET			
		37. LOWER EXTREMITIES (except feet) (Strength, range of motion)			
		38. SPINE, OTHER MUSCULOSKELETAL			
		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS			
		40. SKIN, LYMPHATICS			
		41. NEUROLOGIC (Equilibrium tests under item 72)			
		42. PSYCHIATRIC (Specify any personality deviation)			
Females only		(Check how done)			
		43. PELVIC <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL			

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O.—Restorable teeth X.—Missing teeth (6 X 3).—Fixed bridge, brackets to include abutments I.—Nonrestorable teeth XXX.—Replaced by dentures																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	T

45. URINALYSIS—SP. GR.			46. CHEST X-RAY (Place, date, film number, result)			47. SEROLOGY (Specify test used and result)		
ALBUMIN	SUGAR	MICROSCOPIC						
48. EKG			49. BLOOD TYPE AND RH FACTOR			50. OTHER TESTS		

MEASUREMENTS AND OTHER FINDINGS

61. HEIGHT 63"		62. WEIGHT 100		63. COLOR HAIR brown		64. COLOR EYES brown		65. BUILD: SLENDER <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE <input type="checkbox"/>		66. TEMP.	
67. BLOOD PRESSURE (Arm at heart level)						68. PULSE (Arm at heart level)					
SITTING		SYS.		RECUMBENT		SYS.		STANDING (3 min.)		SYS.	
DIAS.		DIAS.		DIAS.		DIAS.		DIAS.		DIAS.	
69. DISTANT VISION						70. REFRACTION			71. NEAR VISION		
RIGHT 20/		CORR. TO 20/		BY		S.		CX		CORR. TO	
LEFT 20/		CORR. TO 20/		BY		S.		CX		CORR. TO	
62. METEOROPHOBIA: (Specify distance) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD											
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)			
RIGHT LEFT								UNCORRECTED			
								CORRECTED			
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS		69. INTRAOCULAR TENSION	
70. HEARING			71. AUDIOMETER							72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)	
			250 500 1000 2000 3000 4000 5000 Hz Hz Hz Hz Hz Hz Hz Hz								
RIGHT WV /15 SV /15			RIGHT								
LEFT WV /15 SV /15			LEFT								

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

no complaints

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

Healthy male

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. PHYSICAL PROFILE

P	U	L	H	E	S

PHYSICAL CATEGORY

A	B	C	E

77. EXAMINEE (Check)



IS

QUALIFIED FOR

reg duty

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

REPORT OF MEDICAL HISTORY

(THIS INFORMATION IS FOR OFFICIAL AND MEDICALLY-CONFIDENTIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS)

1. LAST NAME—FIRST NAME—MIDDLE NAME

PIRELLI, ALFONSO

2. SOCIAL SECURITY OR IDENTIFICATION NO.

80054

3. HOME ADDRESS (No. street or RFD, city or town, State, and ZIP CODE)

4. POSITION (Title, grade, component)

5. PURPOSE OF EXAMINATION

6. DATE OF EXAMINATION

7. EXAMINING FACILITY OR EXAMINER, AND ADDRESS
(Include ZIP Code)

8. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)

9. HAVE YOU EVER (Please check each item)

YES NO

(Check each item)

☒ Lived with anyone who had tuberculosis

☒ Coughed up blood

☒ Bled excessively after injury or tooth extraction

☒ Attempted suicide

☒ Been a sleepwalker

10. DO YOU (Please check each item)

YES NO

(Check each item)

☒ Wear glasses or contact lenses

☒ Have vision in both eyes

☒ Wear a hearing aid

☒ Stutter or stammer habitually

☒ Wear a brace or back support

11. HAVE YOU EVER HAD (Check each item)

YES NO

DON'T KNOW

(Check each item)

☒ Scarlet fever, erysipelas

☒ Rheumatic fever

☒ Swollen or painful joints

☒ Frequent or severe headache

☒ Dizziness or fainting spells

☒ Eye trouble

☒ Ear, nose, or throat trouble

☒ Hearing loss

☒ Chronic or frequent colds

☒ Severe tooth or gum trouble

☒ Sinusitis

☒ Hay Fever

☒ Head injury

☒ Skin diseases

☒ Thyroid trouble

☒ Tuberculosis

☒ Asthma

☒ Shortness of breath

☒ Pain or pressure in chest

☒ Chronic cough

☒ Palpitation or pounding heart

☒ Heart trouble

☒ High or low blood pressure

YES NO

DON'T KNOW

(Check each item)

☒ Cramps in your legs

☒ Frequent indigestion

☒ Stomach, liver, or intestinal trouble

☒ Gall bladder trouble or gallstones

☒ Jaundice or hepatitis

☒ Adverse reaction to serum, drug, or medicine

☒ Broken bones *1973 ARMS*

☒ Tumor, growth, cyst, cancer

☒ Rupture/hernia

☒ Piles or rectal disease

☒ Frequent or painful urination

☒ Bed wetting since age 12

☒ Kidney stone or blood in urine

☒ Sugar or albumin in urine

☒ VD—Syphilis, gonorrhea, etc.

☒ Recent gain or loss of weight

☒ Arthritis, Rheumatism, or Bursitis

☒ Bone, joint or other deformity

☒ Lameness

☒ Loss of finger or toe

☒ Painful or "trick" shoulder or elbow

☒ Recurrent back pain

YES NO

DON'T KNOW

(Check each item)

☒ "Trick" or locked knee

☒ Foot trouble

☒ Neuritis

☒ Paralysis (include infantile)

☒ Epilepsy or fits

☒ Car, train, sea or air sickness

☒ Frequent trouble sleeping

☒ Depression or excessive worry

☒ Loss of memory or amnesia

☒ Nervous trouble of any sort

☒ Periods of unconsciousness

12. FEMALES ONLY: HAVE YOU EVER

☐ YES ☐ NO

Been treated for a female disorder

Had a change in menstrual pattern

13. WHAT IS YOUR USUAL OCCUPATION?

14. ARE YOU (Check one)

☒ Right handed

☐ Left handed

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT		
		15. Have you been refused employment or been unable to hold a job or stay in school because of: A. Sensitivity to chemicals, dust, sunlight, etc.		
		B. Inability to perform certain motions.		
		C. Inability to assume certain positions.		
		D. Other medical reasons (If yes, give reasons.)		
		16. Have you ever been treated for a mental condition? (If yes, specify when, where, and give details.)		
		17. Have you ever been denied life insurance? (If yes, state reason and give details.)		
		18. Have you had, or have you been advised to have, any operations? (If yes, describe and give age at which occurred.)		
		19. Have you ever been a patient in any type of hospitals? (If yes, specify when, where, why, and name of doctor and complete address of hospital.)		
		20. Have you ever had any illness or injury other than those already noted? (If yes, specify when, where, and give details.)		
		21. Have you consulted or been treated by clinics, physicians, healers, or other practitioners within the past 5 years for other than minor illnesses? (If yes, give complete address of doctor, hospital, clinic, and details.)		
		22. Have you ever been rejected for military service because of physical, mental, or other reasons? (If yes, give date and reason for rejection.)		
		23. Have you ever been discharged from military service because of physical, mental, or other reasons? (If yes, give date, reason, and type of discharge; whether honorable, other than honorable, for unfitness or unsuitability.)		
		24. Have you ever received, is there pending, or have you applied for pension or compensation for existing disability? (If yes, specify what kind, granted by whom, and what amount, when, why.)		
<p>I certify that I have reviewed the foregoing information supplied by me and that it is true and complete to the best of my knowledge. I authorize any of the doctors, hospitals, or clinics mentioned above to furnish the Government a complete transcript of my medical record for purposes of processing my application for this employment or service.</p>				
TYPED OR PRINTED NAME OF EXAMINEE		SIGNATURE		
<p>NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY." 25. Physician's summary and elaboration of all pertinent data (Physician shall comment on all positive answers in items 9 through 24. Physician may develop by interview any additional medical history he deems important, and record any significant findings here.)</p>				
TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER		DATE	SIGNATURE	NUMBER OF ATTACHED SHEETS

HEALTH RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)		
1/14/74	no show on		
1/14/74	1040 am	PE by CMO - Healthy male w/ no complaints.	Re
5/29/74	8 ⁴⁰ pm	1/2 Resection of duodenum. Gompertz signpost star given	
2/7/75	Released from institution?		
		E. Thompson - Sec.	
2/21/75	Recommitted to institution		
	Ret. from observation, Kings County Hospital		
2/22/75	10 am	- 1/2 upset stomach - Engorgement	J. Somell
	stat		Amsterdam
2-26-75	Has difficulty sleeping - possibly some degree hallucinations.		
	Rx. Mellaril 50 mg H.S. p.o. x 14		
	M. Gleditsen MD		
3/14/75	Notified by U.S. Attorney that there was had some type of seizure in Court Room Corridor		
	J. Somell		

PATIENT'S IDENTIFICATION (Use this Space for Mechanical Imprint)



PATIENT'S NAME (Last, First, Middle Initial)			SEX
PINEROS, Alfonso			M
YEAR OF BIRTH	RELATIONSHIP TO SPONSOR	COMPONENT/STATUS	DEPART/SERVICE
11/12/38			
SPONSOR'S NAME			RANK/GRADE
SSAN OR IDENTIFICATION NO.			ORGANIZATION
80054-158			F.D.H., New York

CHRONOLOGICAL RECORD OF MEDICAL CARE

Standard Form 600
September 1971
General Services Administration and
Interagency Comm. on Medical Records
FPMR 101-11.809-3
600-104

D-1

A 167

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

11/2 5/74

Recommitted to institution from Springfield.

T-48² P-68 R-16 BP 98/60

normal healthy male to past history of
 mental competency a spl. *Unstable*
 Council + Sec'd til x 3

5/31/74

In - Penicillin coming for insurance *Unstable*

12-16-74

C/C UPGASTRIC DISTRESS & DIARRHEA.

EXAM: NO REBOUND TENDERNESS PRESENT,
 HOWEVER PT. HAS HEPATOMEGLIA.

Hx: SKULL FX. - 1973

GANGREN (L) LEG 1972. - DEBRIDEMENT
 WAS DONE - LATERAL (L) & (R).

PT. EXPERIENCES PAIN OCCASIONALLY OF
 (L) LEG.

Rx: COMBID SPAN - T CAP. P MEALS. x 4
 PARAFON TURE II. TABS QOH x 4

Gogo Flue &

PATIENT'S IDENTIFICATION (Use this Space for Mechanical Imprint)

PATIENT'S NAME (Last, First, Middle initial)			SEX
PINEROS, Alfonso			M
YEAR OF BIRTH	RELATIONSHIP TO SPONSOR	COMPONENT/STATUS	DEPART/SERVICE
11/12/38			
SPONSOR'S NAME			RANK/GRADE
SSAN OR IDENTIFICATION NO.			ORGANIZATION
80054-158			F.D.H., New York

CHRONOLOGICAL RECORD OF MEDICAL CARE

Standard Form 600
 September 1971
 General Services Administration and
 Interagency Comm. on Medical Records
 FPMR 101-11.809-3
 600-104

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
3-14-75	Pt had "seizure" this A.M. after court
3:30 PM	when he was informed that he had been
	found "competent".
	Pt denies any previous seizures.
	Accepts court finding which he under-
	stood. He was very nervous in
	court this morning, thinks he
	fainted, and just now still feels
	dizzy and a little weak.
	Mr. Pineros came quickly
	when he was paged, and was appropriate
	and in good contact. Memory seems
	adequate, and pt generally seems to be
	functioning adequately.
	Pt discussed with Asst U.S. Attorney
	Ethan Levin-Epstein - 596-4225
	U. Gussenden MD
3-14 - addenda -	Has not picked up medication.
	D.C. Mellan
	Rx - Valium 10 mg H.S. p.o. x 14
3-28-75	Renews Valium 10 mg H.S. p.o. x 14
	U. Gussenden MD
	R. Stevens

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

4-14-75

Nervous, unable to sleep, headaches
 going back + forth to count - but
 no dreams.

Rx 1. Valium 10 mg H.S. x 14

U. Gieseler W.D.
 W

5-2-75

Renew Valium 10 mg H.S. p.o. x 14 prn

U. Gieseler W.D.
 JS

5-20-75

Valium 10 mg H.S. p.o. x 14 prn

U. Gieseler W.D.

5-20-75

10 mg Valium H.S. p.o. x 14 prn

U. Gieseler W.D.
 JS

PATIENT'S IDENTIFICATION (Use this Space for Mechanical Imprint)

PATIENT'S NAME (Last, First, Middle initial)

Pineros

SEX

YEAR OF BIRTH

RELATIONSHIP TO SPONSOR

COMPONENT/STATUS

DEPART/SERVICE

SPONSOR'S NAME

RANK/GRADE

SSAN OR IDENTIFICATION NO.

80054.

ORGANIZATION

CHRONOLOGICAL RECORD OF MEDICAL CARE

Standard Form 600
 September 1971

General Services Administration and
 Interagency Comm. on Medical Records

FPMR 101-11.809-3
 600-104

I

L

P

1



Edmund Byrne

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
6-5-75	Pr depressed with many problems and several complaints
	Rx: Valium 10 mg B.I.D p.o. x 7
	W. Goldstein MD
6-16-75	Valium 10 mg B.I.D p.o. x 7
	W. Goldstein MD

FEDERAL DETENTION HEADQUARTERS
427 West Street
New York, New York 10014

A 171

Date: 24 February 1975

TO : Administrator, Medicos Lejista, Calle 7 Carrera 12-2, Bogota, Columbia

FROM: Anthony Ruggiero, M.D.
Federal Detention Headquarters
427 West Street
New York, New York 10014

RE : Mr. Gilberto Amaya /Alfonso Pinedos

The above subject (inmate - ~~xxxxxxx~~) of this institution has informed us that he was treated by you in August 1971 on an outpatient basis for a period of 3 months

In order that we may better provide for his medical needs, we shall be grateful if you will furnish us with his medical and/or psychiatric records.

Your cooperation is greatly appreciated. You may be certain that the forwarded information shall be treated confidentially.

By direction of the Medical Officer.

Respectfully,

E. M. Lucero
E. M. Lucero
HOSPITAL ADMINISTRATOR

You are hereby authorized to release all, or any part of my medical and/or psychiatric records to the Medical Officer, Federal Detention Headquarters, New York, N. Y. 10014

DATE: 24 Feb 1975

Gilberto Amaya
Signed

DR. JAIRO MUNOZ ESCOBAR
NEUROSURGERY-NEUROLOGY

=====

A 172
Summary of Clinical History
No. 602775

Name: GILBERTO AMAYA
Date of Entrance: May 22/71
Date of Discharge: July 22/71

DEFINITIVE DIAGNOSES:

- 1- MULTIPLE TRAUMATISMS
- 2- SEVERE CRANEO-ENCEPHALIC TRAUMATISM - CEREBRAL CONTUSION - RIGHT TEMPORAL FRACTURE - SUBARACHNOIDAL HEMORRHAGE (TRAUMATIC)
- 3- LUXO-FRACTURE OF LEFT FOOT - FRACTURE OF RIGHT LEG - LUXO-FRACTURE (MONTEGGIA) OF RIGHT FOREARM - FRACTURE OF NASAL BONES PROPER.

Patient approximately 35 years old, native and resident of Bogota, cabinet maker, admitted to the Emergency Service on May 22/71 with multiple traumatism, (including craneo-encephalic traumatism), suffered in automobile accident minutes before entrance. Upon examination, it was found: patient in generally bad condition with right frontal wound, erosions on left shoulder and left hemithorax, signs of fracture of the nasal bones proper, copious epistaxis, fracture of right forearm, fracture of superior third of right leg and and luxofracture of instep of left foot. Traumatic Shock. The Neurological examination showed: patient in moderate coma, agitated, without evident alteration of parietal bones, without signs of lateralization, global exaltation of the tendo-muscular reflexes and bilateral Babinsky. X-Rays of Skull showed Right Temporal Linear Fracture. Other Radiological studies evidenced: Fracture of Nasal Bones Proper, Monteggia Luxofracture on right forearm, Fracture of Right Leg, and Left Astragalus-Scaphoidal Luxofracture, which received opportune Orthopedic and/or Surgical treatment.

The LCR examination showed: severe subarachnoidal hemorrhage. BILATERAL CEREBRAL ANGIOGRAPHY: discarded lesion occupying space. The investigation for fat in urine and saliva was negative. By means of medical treatment in the Intensive Care area, he recovered consciousness on May 27/71 but continued confused, excited, logorrheic, coprolalic. The FRACTIONAL PNEUMO-ENCEPHALOGRAPH, done on July 6/71 was normal. The EEGS in series were all abnormal, lentified but showed progressive recovery of the electrical activity of the cerebral cortex towards abnormality. On July 22/71, clearly recovering, he was discharged from the Hospital, with the indication to come to ambulatory controls for External Neurosurgical and Orthopedic consultation, and also for treatment by the Departments of Physical Medicine and Rehabilitation and Psychiatry.

Ophthalmology control showed "visual agnosia". Another Ophthalmology examination in Oct. 71, evidenced right homonymous hemianopsia with conservation of central vision. RE: 20/20 (Minus) 1 to 20 degrees with correction. LE: 20/20-(Minus). Calcareous lesion ?. By this time he had satisfactorily recovered from the neurologic and osteo-articular lesions. The post-traumatic mental syndrome had also disappeared. The EEG, of Nov. 23/72 was normal. He did not return to controls.

Signature of Physician

JAIRO MUNOZ ESCOBAR
NEUROSURGEON.

m Translated by Emil C. Rodriguez.

UNITED STATES DEPARTMENT OF JUSTICE
BUREAU OF PRISONS
MEDICAL CENTER FOR FEDERAL PRISONERS
SPRINGFIELD, MISSOURI 65802

July 21, 1975

A 174
741036
Levin-Epstein

Mr. Ethan Levin Epstein
U.S. Attorney
Eastern District of New York
225 Cadman Place East
Brooklyn, New York 11201

Your Reference: Pineros, Alfonso

Our Reference: Reg #: 21611-175

THE REQUEST TO FURNISH YOU INFORMATION CONCERNING THE ABOVE PATIENT HAS BEEN RECEIVED. THE FOLLOWING CHECKED ITEM IS APPLICABLE TO THIS REQUEST:

The above-captioned former patient and all records were transferred to:

We are forwarding your request and you should hear from them soon.

The records of this former patient have been sent to storage; we will answer your request as soon as the records are returned to us, however, there will be a slight delay in our reply because of the time involved in acquiring the record from storage

We are unable to identify this individual. If you can furnish additional information such as birth date, date of admission and/or date of discharge as well as verification of spelling of name, we will be glad to make another search.

Medical information is confidential by law and may be released only upon written consent of the patient or former patient. If you will forward a signed consent form, authorizing the release, we shall comply with your request.

Bureau of Prisons Regulations prevent our forwarding medical records directly to you. Please have your doctor request the necessary information and enclose your signed authorization for the release of the information.

We cannot release information directly to you. Please have your attorney request the information needed, stating how the information is to be used and enclose your signed authorization. We will then be able to process the request through our regional legal counsel.

The information is enclosed as requested. Its confidentiality must be protected.

XXX

Other: Per telephone request to Dr. Varhely enclosed please find 18 pages of the complete medical file on the above for Dates 7/15/74 through 12/11/74,

as well as psychiatric + psychological reports

O Belle Cox ART

Mrs. O. Belle Cox, A.R.T. Medical Record Administrator
MEDICAL CENTER FOR FEDERAL PRISONERS

IN-PATIENT MEDICAL RECORD
COVER SHEET

2-1

A 175

PINEROS, Alfonso

Name _____

No. 21611-175
Age: 34

Date of Admission 7-15-74 Date of Discharge 12/11/74 Days in Hospital 149

DIAGNOSES LISTED IN ORDER OF THEIR IMPORTANCE	CODE NUMBER
<i>Primary Periodic Asthma</i>	<i>4.1 - ✓</i>
<i>High blood pressure</i>	
<i>Heart, degenerative</i>	<i>3.1.9 ✓</i>
<i>Chronic Bronchitis</i>	<i>306.9 ✓</i>

OPERATIONS AND OTHER THERAPEUTIC PROCEDURES	CODE NUMBER

DISPOSITION:

To Duty _____ Quarters _____ Convalescence _____
Transferred to _____ Died _____

Stamp name of institution Medical Center for Federal Prisoners
Springfield, Missouri 65802

[Signature]

Surgeon

CLINICAL RECORD	NARRATIVE SUMMARY A 176	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED

(Sign and date at end of narrative)

DISCHARGE REPORT

IDENTIFICATION: Alfonso Pineros is a 34 year old male who entered Medical Center for Federal Prisoners on July 15, 1974, under Title 18, Section 4244, for competency evaluation and charged with the alleged offense of possession of cocaine.

HOSPITAL COURSE: Mr. Pineros made a conforming type of adjustment to an open ward. He evidently required no psychotropic medication during his entire period of observation and at the time of discharge these medications were not indicated.

LABORATORY DATA: Routine studies consisting of VDRL, complete blood count, complete urinalysis and chest film were within normal limits.

Mr. Pineros was seen on October 25, 1974, by Dr. Clifford I. Whipple, Consulting Psychologist, who administered a series of psychometric tests and was of the opinion that the the test results did not reveal organic or psychotic behavior in this patient.

The patient was seen by Dr. Emasue Snow on November 11, 1974, who gave him a diagnosis of personality disorder, antisocial type, moderate.

DIAGNOSIS: Personality disorder, antisocial type, with evidence of dangerous drug dependency.

DISPOSITION: On December 7, 1974, Mr. Pineros was discharged from the Medical Center to return back to the appropriate court of reference.

H.B. FAIN, M.D.

Dictated: 1/13/75

HBF:sb

Typed: 1/13/75

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN <i>H.B. Fain</i>	DATE 1/13/75	IDENTIFICATION NO.	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO. 0-21611-175	WARD NO.

PINEROS, Alfonso

NARRATIVE SUMMARY
Standard Form 502
502-107

CLINICAL RECORD

HISTORY—Part I

NATURE AND DURATION OF COMPLAINTS (Include circumstance of admission)

Admitted 7-15-74 as Psychiatric
Eval + Obs -

HISTORY OF PRESENT ILLNESSES

34-yr old South American Married male.
Born in Bogota, Col.
Charged w/ Possession of -
Cocaine.

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

21611-175

WARD NO.

2-1-61

PINEROS, Alfonso

HISTORY—Part 1

Standard Form 504
504-105

CLINICAL RECORD

HISTORY—Part 2

PAST HISTORY

INSTRUCTIONS.—Include (1) OCCUPATION (Civilian and military), (2) MILITARY HISTORY (Include geographic locations and dates), (3) HABITS (Alcohol, tobacco, and drugs), (4) FAMILY HISTORY, (5) CHILDHOOD ILLNESSES, (6) ADULT ILLNESSES, (7) OPERATIONS, (8) INJURIES, and (9) DRUG SENSITIVITIES AND ALLERGIC REACTIONS.

- 1) Furniture Man
- 2) No Military Service
- 3) Smokes - Occasional
Alc - Social drinker
Drugs - Denies
- 4) Mother - 80 yrs old - well
Father - deceased old age - 2 sisters
No TB or diabetes in family
- 5) ucd
- 6) No serious illnessness
- 7) ~~Beat up~~ by blacks. in N.Y. head injury 1973
- 8) Knee injury (doesn't know how injured)
infected Gangrene - Surgery performed
1968 - Hospital Benguala, S.A.
serious head injury in Car wreck 1969.
- 9) No Known Allergies

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

21611-125

WARD NO.

2-1-61

HISTORY (Parts 2 and 3)
Standard Form 505

505-105

PINEROS, Alfonso

SYSTEM REVIEW

INSTRUCTIONS.—Include (1) GENERAL, (2) HEAD [including (3) EYE, (4) EAR, (5) NOSE and (6) THROAT], (7) NECK, (8) RESPIRATORY, (9) CARDIOVASCULAR, (10) GASTROINTESTINAL, (11) GENITO-URINARY [and (12) GYNECOLOGICAL], (13) HEMOPOIETIC, (14) LYMPHATIC, (15) MUSCULO-SKELETAL and (16) NEURO-PSYCHIATRIC SYSTEMS.

- 1 34-yr old South American (frail). Pleasant
- 2 See #8
- 3 Very little vision right eye. (Car accident 1969)
- 4 ok
- 5 ok
- 6 ok
- 7 Some pain since car accident 1969
- 8)
- 9
- 10-
- 11 Denies VD.
- 13 neg
- 14 neg
- 15 neg
- 16 - 1969 Seen by Psychiatrist after Car Accident - Claims unconsciousness 5 mo. Denies seizures - Does not hear voices

SIGNATURE OF PHYSICIAN

M. Kellard RN

DATE

7-17-74

CLINICAL RECORD

PHYSICAL EXAMINATION

A 180

DATE OF EXAM.	HEIGHT	WEIGHT			TEMPERATURE	PULSE	BLOOD PRESSURE
		AVERAGE	MAXIMUM	PRESENT			
7/18/74	5'-2"			120#	—	72	118/58

INSTRUCTIONS.—Describe (1) General Appearance and Mental Status; (2) Head and Neck (General); (3) Eyes; (4) Ears; (5) Nose; (6) Mouth; (7) Throat; (8) Teeth; (9) Chest (General); (10) Lungs; (11) Cardiovascular; (12) Abdomen; (13) Hernia; (14) Genitalia; (15) Rectum; (16) Prostate; (17) Back; (18) Extremities; (19) Neurological; (20) Skin; (21) Lymphatics.

- 1) WLD, WLV, Slightly built, 34 yr old, CAUCASIAN male in no acute distress.
- 2) Normocephalic, Neck supple/non tender
- 3) XOM - WNL, Pupils Respond = to $\frac{1}{2}$, Fundiscopic normal however pt denies vision @ eye.
- 4) Tympanics intact good light response
- 5) Good Airway, Normal mucosa.
- 6) Normal mucosa
- 7) Pharynx clear, tonsils present WNL
- 8) ↑ & ↓ partial plates
- 9) Normal bony thorax
- 10) Lungs bilaterally clear to auscultation
- 11) Sinus Rhythm rate 72
- 12) Soft non tender
- 13) Neg for hernia
- 14) Normal adult (♂) male.

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

21611-175-

WARD NO.

2-1-61

PINEROS, Alfonso

PHYSICAL EXAMINATION

Standard Form 506

506-104

- 15) No external lags
- 16) No exam
- 17) ROM WNL
- 18) Has surgical scar 5"-7" in length Anterior/Medial aspect of R forearm (? open reduction)
- 19) DTR Lt bilaterally.
- 20) Clear, normal color, tone and temp.
- 21) Lymphatics neg on exam

- 1) ? Blind R eye
- 2) Status Post Open Reduction R forearm.
- 3) Psych eval/obser.

INITIAL IMPRESSION

SIGNATURE OF PHYSICIAN

E. Snow M.D.

2/18/74

ADMISSION MEDICAL INSPECTION A 182

NAME: PINEROS Alfonso Admission Date: 7/15/74
 (Last) (First) (Middle) HOUR: 4:00

Register No: 21611-195 Height: 5' 2 Weight: 120
 Age: 34 Color: white Religion: Catholic Date of Birth: 9/27/41

Referral Medical Summary Attaches: (Circle) YES NO

Special shoes or surgical prosthesis, if any, briefly describe and mark for retention until appropriate committee can examine.

Treatment orders and management precautions pending examination by Ward Surgeon.

4244

Records and findings indicate that this patient should be classified (Circle one)

MEDICAL SERVICE (Including TB) SURGICAL SERVICE PSYCHIATRIC SERVICE
 PRISON CAMP DEPT PARA-MEDICAL (PCS)

Ward Assignment: 2-1 SIGNATURE: [Signature]

SIGNATURE: [Signature]
 ADMITTING OFFICER

PERSON TO BE NOTIFIED IN CASE OF SERIOUS ILLNESS OR DEATH:

NAME: Carmen Contreras Relationship:

STREET ADDRESS: Calle 4B #29E

CITY: STATE: ZIP CODE:

TELEPHONE NUMBER: AREA CODE:

NOTE: In Triplicate:

- (1) Original Copy to be forwarded to Ward of Residence Office.
- (2) Duplicate Copy goes to the Clinical Director's Office.
- (3) Duplicate Copy goes to the Record Office.

CLINICAL RECORD

DOCTOR'S ORDERS

(Sign all orders)

A 183

DATE AND TIME		Rx	DRUG ORDERS	DOCTOR'S SIGNATURE	NURSE'S SIGNATURE
START	STOP		(Another brand of a generically equivalent product, identical in dosage form and content of active ingredient(s), may be administered UNLESS checked here)		
			ADMISSION ORDERS		
			ADMIT TO 2-I-E		
			REGULAR DIET		
			CBC		
			V.D.R.		
			URINALYSIS		
			CHEST X-RAY		
7/15/74					
7/18		① Refer EENT ②		<i>[Signature]</i>	<i>[Signature]</i>
7/16				<i>[Signature]</i>	

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

2/6/1-125

WARD NO.

DOCTOR'S ORDERS
Standard Form 508
508-107

Pireros, Alfonso

CLINICAL RECORD

DOCTOR'S PROGRESS NOTES
(Sign all notes)

A 184

DATE

ADMISSION NOTE:

2/18/74 Physical exam performed this date patient most cooperative. Claims no Vision (R) eye Acuity test not performed, however remainder fundus, xon Pupil light Response was WNL. Referred ENT

William RA

(Continue on reverse side)

PATIENT'S IDENTIFICATION (For typed or written entries give Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

21611175

WARD NO.

111

DOCTOR'S PROGRESS NOTES

Standard Form 509

May 1969 (Rev.)

General Services Admin. &

Int. Agency Comm. on Med. Records

509-107

PINEROS, Alvaro

NURSING NOTES

(Sign all notes)

DATE	HOUR		OBSERVATIONS Include medication and treatment when indicated	A 186
	A.M.	P.M.		
9/23/74		5	Transfer from 106 to 105.	Wampler
10-8-74			Staffed by Forensic Team as incompetent. This patient cannot speak or understand English. Claims he cannot remember anything after Nov 1973. Does not remember crime (Dad of Cocaine) Dysocial behavior. Team members present at Staffing - Ms Oregon, Dr Snow, Dr Davis, Mr Bauldin, Mr Dean, Mr Briggs, Dr Whipple, Mr Rosenblatter. Dr Shepard for	
10-24-74		3	PT. Friendly but almost mute. Very down in mood. Painting & drawing occupies most of his time.	Dr. Clark
11-6-74			Staffed this date by Forensic team as Competent & Responsible. Team members present Dr Snow, Ms Oregon, Dr Whipple, Mr Horton, Mr Bauldin, Mr Dean, Mr Rosenblatter. Dr Shepard for	

Pineros, Alfredo

48-10-11020-2

NURSING NOTES
Standard Form 510
(Reverse)

2611-175

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO:

FROM: (Requesting ward, unit, or activity)

DATE OF REQUEST

REASON FOR REQUEST (Complaints and findings)

Check eyes - refraction

(Seen by Dr. Chan 10-21)

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE

APPROVED

PLACE OF CONSULTATION

☐ BEDSIDE ☐ ON CALL

☐ EMERGENCY

☐ ROUTINE

CONSULTATION REPORT

10-22-74 Callout - NO SHOW

JS

(Continued on reverse side)

SIGNATURE AND TITLE

DATE

IDENTIFICATION NO.

ORGANIZATION

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)

REGISTER NO.

WARD NO.

21611-115

10-E

CONSULTATION SHEET

Standard Form 513
513-101

CLINICAL RECORD

CONSULTATION SHEET

REQUEST

TO: *LENT (CPD)*

FROM: (Requesting ward, unit, or activity)
2-1

DATE OF REQUEST
8/19/74

REASON FOR REQUEST (Complaints and findings)

*Claims no vision @ eye, laterally.
Tunnel vision Z.*

PROVISIONAL DIAGNOSIS

DOCTOR'S SIGNATURE

Mr. SKOKEM

APPROVED

PLACE OF CONSULTATION

☐ BEDSIDE

☐ ON CALL

☐ EMERGENCY

☐ ROUTINE

CONSULTATION REPORT

*Hx of auto accident 2 yrs ago - unconscious
for 3mo - VA "gone when he woke" - Has been
examined & told "no help"*

*Pupils reactive but swinging light positive
to the right. Extraocular muscles OK. Arthro.
Disc pale a.d. - cup is not deep but enlarged O.
Mac & Post Pole are normal.*

Slit - w.N.h.

Imp: Optic nerve damage 2° to trauma.

(Continued on reverse side)

SIGNATURE AND TITLE <i>E. K. Ellison M.D.</i>	DATE <i>11-21-74</i>	IDENTIFICATION NO.	ORGANIZATION <i>10F</i>
PATIENT'S IDENTIFICATION (For typed or written entries give: Name--last, first, middle; grade; date, hospital or medical facility)		REGISTER NO. <i>21611-175</i>	WARD NO. <i>2-1-10</i>

PINERDZ.

PINERDZ.

Wmas

NEW ADM.

2-1-W

A 190

PINEROZ

Enter in above space: PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE

REPORTED BY

MD

DATE

SEROLOGY

SPECIMEN/LAB. RPT. NO.

URGENCY

☐ ROUTINETODAY ☐☐ PRE-OPSTAT ☐

PATIENT STATUS

☐ BED☐ AMB.OUTPATIENT ☐☐ NP☐ DOM.

SPECIMEN SOURCE

☐ BLOOD☐ OTHER (Specify)

LAB. ID. NO.

REMARKS:

VDRL: NONREACTIVE

TEST(S)	SPECIMEN TAKEN	TIME	AM	P.M.	REQUESTED	INF. MONO. QUAL.	INF. MONO. QUANT.	RPR	VDRL QUAL.	VDRL QUANT.	FTABARS	TA	RA	ANTINUCLEAR FACTOR (AFT)	COLD AGG.	ASD	CRP	SERUM COMPLEMENT	FERRIC AGG.	COMP. FTL	NAI
DATE	RESULTS																				

Standard Form 351 (July 1971)—GSA FPMR 101-11.6

SEROLOGY

PINEROZ

NEW, ADM.

2-1-W

21611-175

Enter in above space: PATIENT IDENTIFICATION—TREATING FACILITY—WARD NO.—DATE

REQUESTING PHYSICIAN'S SIGNATURE

REPORTED BY

MD

DATE

TECH

HAMA-TOLOGY

SPECIMEN/LAB. RPT. NO.

URGENCY

☒ ROUTINETODAY ☐☐ PRE-OPSTAT ☐

PATIENT STATUS

☐ BED☒ AMB.OUTPATIENT ☐☐ NP☐ DOM.

SPECIMEN SOURCE

☐ VEIN☐ CAP☐ OTHER (Specify)

LAB ID. NO.

REMARKS:

TEST(S)	SPECIMEN TAKEN		TIME	METER		AUTO MATED																									
	DATE	TIME		AM	PM		MANUAL	REQUESTED	WBC COUNT	HGB	HCT	WBC COUNT	DIFF. COUNT	PLATELETS	WBC	SED RATE	PLATELET COUNT	RETICULO CYTE COUNT	COATING TIME	BLEEDING TIME	P CONTROL	PATIENT	CONTROL	PATIENT	ACTIVITY	RA110	ESCHLING TEST	LE PREP	MEV	MON	MCAC
	RESULTS																														
	4550																														
	17.0																														
	50																														
	5550																														
	2																														
	55																														
	34																														
	6																														
	0																														
	3																														

Standard Form 543 (July 1971)—GSA FPMR 101-11.6

HEMATOLOGY

LABORATORY REPORTS

ATTACH 2D REPORT WITH TOP AT THIS LINE ↑

ATTACHING MARGIN

PINEROZ

NEW, ADM

2-14W

21611-125

Enter in above space: **PATIENT IDENTIFICATION-TREATING FACILITY-WARD NO.-DATE**

REQUESTING PHYSICIAN'S SIGNATURE

REPORTED BY

AND

DATE _____

TECH

7/10

LAB. ID. NO.

REMARKS:

PATIENT'S

PINEROS, Alfonso

LABORATORY REPORTS

Standard Form 514

514-106

CLINICAL RECORD

RADIOGRAPHIC REPORTS

A 192

ATTACH 3D REPORT ALONG HERE ↑ AND SUCCEEDING ONES ON ABOVE LINES

ATTACH 2D REPORT WITH TOP AT THIS LINE ↑

PATIENT'S LAST NAME-FIRST NAME-MIDDLE NAME

REGISTER NO.

WARD NO.

2-1-W

AGE 33 SEX M (Check one)
☐ BEDSIDE, WHEELCHAIR ☐ BED ☐ PATIENT ☐ AMBULATORY
OR STRETCHER

EXAMINATION REQUESTED

PA chest

(Above space for mechanical imprinting, if used)

PERTINENT CLINICAL HISTORY, OPERATIONS, PHYSICAL FINDINGS, AND PROVISIONAL DIAGNOSIS

M. adm.

FILM NO.

DATE OF REQUEST

REQUESTED BY

RADIOGRAPHIC REPORT

CH. ST: RADIOGRAPHICALLY NORMAL.

7-17-74

M. NAPPER, M.D. RADIOLOG ST

DATE OF REPORT:

SIGNATURE: (Specify location of laboratory if not part of requesting facility)

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

grade; date; hospital or medical facility)

Standard Form 519-A (Rev. Aug. 1954)
Promulgated by Bureau of the Budget
Circular A-32 (Rev.)
RADIOGRAPHIC REPORT
519-207

RADIOGRAPHIC REPORTS

Standard Form 519
519-106

M. C. F. P.

SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT "0"

Committed Name PINEROS, Alfonso

Reg. No. 21611-175

Date 10/10/74

REPORT OF PSYCHIATRIC EXAMINATION

IDENTIFICATION:

This is a 37 year old native of Colombia, who was admitted to the Medical Center for Federal Prisoners on July 15, 1974, pursuant to an order issued by the U.S. District Court, Eastern District of New York, for psychiatric observation and evaluation to determine his mental competency to stand trial under the provisions of Title 18, Section 4244. He is charged with conspiracy to possess and sell cocaine.

PRESENTING PROBLEM:

This patient was examined previously at the Medical Center for Federal Prisoners from February 23, 1974 until April 25, 1974, at which time the staff concluded that he was mentally incompetent to stand trial. Upon his return to New York City a hearing was held on July 3, 1974, and a new order for psychiatric examination to determine his mental competency was issued. Although we have repeatedly requested information from the U.S. attorney who filed the motion pertaining to this re-examination, we have received no further reason why another period of observation was considered necessary.

We have not received any available data regarding the circumstances which led to this patient's arrest or any investigation material regarding his background. We were informed on March 1, 1974, in a letter, that there exists an eleven count indictment charging him with conspiracy to possess and distribute cocaine, and that "agents involved in the investigation" reported that throughout extended contact with this patient he appeared to be sane. Without any specific details of the charges pending, even of the date or location of his arrest, we must depend solely on the information chosen to be divulged by the patient. He, in turn, insists he does not remember anything about his arrest, and has never been advised about the charges other than he thinks he was charged with possession of cocaine. It is thus impossible to offer any definitive professional judgment regarding the patient's mental condition.

PAST HISTORY:

Mr. Pineros claims he was born in Bogota, Colombia, where he completed only a third grade education and he worked with his father as a carpenter before he came to New York City sometime in 1972 or 1973 to find work. He claims he was injured in an accident in Colombia, in 1972.

A 194

M. C. F. P.

SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT

"O"

Committed Name PINEROS, Alfonso

Reg. No. 21611-175

Date 10/10/74

-2-

Mr. Pineros was able to remember that he lived in a room in Manhattan and worked at a grocery in Queen's for a naturalized citizen of the United States named Marcos Castro. He travelled to his work by subway daily and helped to clean the store and carry out packages. He was paid \$80.00 for this job. He is married and has four children, two sons, ages fourteen and six, and two daughters, ages twelve and four. His wife came to New York this past year to be near him since she learned he was hospitalized. Her name is Yolanda and he stated that they had lived together for many years before their legal marriage in 1965. He communicates with her regularly by mail or telephone where she is staying in New York City.

MENTAL STATUS:

Mr. Pineros is a short, slender man who speaks only Spanish. He is generally neat in personal appearance and has maintained himself independently in the open population since his admission here without incident. He socializes with fellow Spanish speaking patients, is alert, friendly and cooperative with the staff and has offered no subjective complaints. He does not require any medication.

At interview Mr. Pineros is oriented and responds to questions with the aid of an interpreter in a relevant, coherent and logical manner. Although he insists that he cannot remember anything about his activities since November, 1973, he shows no evidence of true memory defects except for a definite circumscribed period of time in late 1973 and early 1974. His affect is appropriate to the situation and to the content of thought expressed. His level of intellectual function appears to be within the average range, and his fund of general information is poor but compatible with his educational background.

This patient shows none of the symptoms of bizarre behavior or thought disorder that were described during his observation at King's County Hospital in January, 1974. Although he seems to exaggerate his inability to comprehend the legal processes, he is mentally capable of understanding daily events clearly and is able to conform his behavior appropriately to the regulations of this hospital. He shows no evidence of any present symptoms of thought disorder, perceptual or affective disturbance and there are no residual defects to suggest a prior psychotic episode detected. In my opinion he is presently capable of understanding the charges and assisting counsel in his own defense.

A 195

M. C. F. P.

SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT

"O"

Committed Name PINEROS, Alfonso

Reg. No. 21611-175

Date 10/10/74

-3-

DIAGNOSTIC IMPRESSION:

Dyssocial behavior.

Emasue Snow M.D.

EMASUE SNOW, M.D.
Staff Psychiatrist

Dictated: 10/10/74

ES: sb

Typed: 10/15/74

MEDICAL CENTER FOR FEDERAL PRISONERS

Springfield, Missouri

SPECIAL PROGRESS REPORT

"O"

Committed Name PINEROS, Alfonso

Reg. No. 21611-175

Date 11/6/74

REPORT OF PSYCHIATRIC STAFF EXAMINATION

On November 6, 1974, the patient was re-examined with the aid of an interpreter in the presence of the following members of the psychiatric team: Dr. Emasue Snow, Staff Psychiatrist; Mrs. Pawnee Creson, R.N., M.S., Unit Manager; Mr. Leon Horton, Case Manager; Mrs. Mabel Pollard, R.N., Psychiatric Nurse; Mr. John Reisenleiter, Staff Psychologist; Dr. Clifford Whipple, Consulting Psychologist; Mr. Edward Dean and Mr. Thomas Bouldin, Correctional Counselors. Following each staff member's report on the patient, the patient was called in and interviewed by the staff. The following summary is the result of the presentations, discussion and conclusions of the psychiatric staff.

IDENTIFICATION: Mr. Pineros is a 37 year old Columbian admitted to the U. S. Medical Center for Federal Prisons on July 15, 1974, per order of the U. S. District Court, Eastern District of New York, under the provisions of Title 18, Section 4244, for psychiatric observation and evaluation of his mental competency to stand trial. He is charged with conspiracy to possess and sell cocaine. Mr. Pineros was previously here at the Medical Center from February 23, 1974, to April 25, 1974, under Title 18, Section 4244. At that time the staff found him to be incompetent for trial.

HOSPITAL COURSE: Since admission Mr. Pineros has behaved in an appropriate manner. He relates well with other patients of Spanish culture. He has engaged in the varied recreational activities provided by the institution and has had no difficulty in conforming with rules and regulations. He has not received any psychotropic medications.

Psychological testing was limited due to the apparent language barrier the patient presented. He was given the Rorschach, Bender-Gestalt and House-Tree-Person tests and was interviewed by Dr. Clifford Whipple, Consulting Psychologist. All of these were accomplished with the aid of an interpreter.

He underwent psychiatric examinations by Dr. Emasue Snow. Her report of October 10, 1974, did not indicate the presence of a psychotic disorder or the presence of a true memory defect.

On October 9, 1974, one day prior to Dr. Snow's dictated psychiatric report, Mr. Pineros was presented to the staff, resulting in the staff opinion that Mr. Pineros presented a language barrier and claimed memory deficit for a period of time, namely, November and December, 1973, and probably due to these things would not be able to or would not assist his attorney and therefore was incompetent. Dr. Snow was present at this staffing.

Following this staffing of October 9, 1974, the staff decided to intensify observation and evaluation. It was discovered that Mr. Pineros' behavior was concise and sharp when in the company of his peers. He spent much time in abstract type games.

MEDICAL CENTER FOR FEDERAL PRISONERS

A 197

Springfield, Missouri

SPECIAL PROGRESS REPORT

"O"

Committed Name PINEROS, Alfonso

Reg. No. 2611-175

Date 11/6/74

- 2 -

It was only when in the presence of staff members did his behavior become resistant to openness although he was courteous and pleasant. His behavior apparently was a controlled manipulative behavior and he was guarded only when he deemed it important to be so.

Subsequent psychiatric interviews resulted in another psychiatric report by Dr. Emasue Snow on November 6, 1974, reflecting again her opinion of the competency of Mr. Pineros.

Physical examination and laboratory testing have all been within normal limits.

Today the staff interviewed Mr. Pineros at length again through a staff interpreter. The psychiatric staff examination, with all professionals concurring, revealed a unanimous opinion of all those directly involved with his observations and evaluations that the patient is competent, that he understands his charge and that he can assist an attorney in his own defense, if he chooses to do so.

DIAGNOSIS: Personality disorder, antisocial type, moderate.

RECOMMENDATION: It is the opinion of the Forensic Staff Team that this man is mentally competent to stand trial. He may be returned to court.

FOR THE STAFF:

Pawnee Creson

Pawnee Creson, R.N., M.S.
Unit Manager, Forensic

Emasue Snow M.D.

Emasue Snow, M.D.
Staff Psychiatrist

PC:fea
Typed 11/12/74

M. C. F. P.

SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT "0"

Committed Name PINEROS, Alphonso

Reg. No. 21611-175

Date 11/6/74

ADDENDUM

REPORT OF PSYCHIATRIC EXAMINATION

HOSPITAL COURSE:

This patient was presented at staffing here on October 9, 1974, when he maintained that he could not account for his past actions or behavior between the months of November, 1973, until June, 1974, because he had suffered a severe blow to his head in a "mugging" incident in New York City sometime last November. His behavior, mood and affect have remained appropriate throughout his observation here from the time of his readmission, and his responses to questions are relevant, coherent and logical. He denied any complaints of physical or mental symptoms other than his helplessness to explain his involvement in the present charges since he maintained that he was amnesic for this entire period. In view of his insistence that he lacked all recollection for these past events and his apparent helplessness to comprehend the serious nature of the legal proceedings, the staff reluctantly agreed that Mr. Pineros could not be found competent to stand trial at this time.

Since the last staff presentation, more specific details of the patient's residence and past history were made available to us and he was re-examined privately on several occasions with this information at hand. The result of these interviews show numerous discrepancies in his own prior account which now make it possible to question his truthfulness.

For example, Mr. Pineros previously stated he came to New York City in 1972, or 1973, from Colombia to seek work. When we confronted him with information obtained from his fingerprint record, he changed his story and stated he first came to the United States in 1966, with his wife, but he denied that he had ever been arrested before this year. When he was questioned about the discrepancy between the two accounts, he offered as an explanation that he had been "very sick" three months ago but is now much improved. He offered further history to confirm his assertion that he was mentally ill at that time by stating that he had been hospitalized in Guatemala in 1969, and in Colombia in 1959, but he could not remember the name of the hospital, location of either one, or the duration of treatment. He could however remember that he had first come to live in

M. C. F. P.
SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT "O"

Committed Name PINEROS, Alphonso

Reg. No. 21611-175

Date 11/6/74

-2-

New York City in 1969, and worked in a bodega at that time.

He was told that we did not believe he had suffered any head injury such as he had previously described since we were informed that there were witnesses who had observed him during the months of November and December, 1973, who saw no physical evidence of serious head injury. He could not explain how he did not require any medical attention for such a severe blow or how his present physical examination showed no evidence of old injury. He simply apologized for his own ignorance and repeated that he must have been so mentally sick that he was not responsible. In an effort to explain how mentally incompetent he had been, he recalled that there were times during November and December when he tried to enter the wrong residence by mistake. He now recalls that he was living on 110th Street in Manhattan, between Broadway and Amsterdam Avenues. When we asked if this could have been 109th instead of 110th Street, he explained that he paid rent to a landlady who lived on 109th Street but his room was actually a block further over on 110th Street.

Mr. Pineros denied that he knew his co-defendant, JORGE Rodriquez, whose name was on the indictment, but he could recall having met this individual when they were both in detention at the West Street facility in New York, in January, 1974.

There were many other discrepancies found during these repeated interviews with Mr. Pineros which illustrates that his insistence that he lacks all memory for events prior to June, 1974, is not true. These do not need to be listed in detail here but it is sufficient to conclude that his cooperation has been consciously and deliberately limited and does not show any basic evidence of mental disorder that would impair his ability to assist counsel in his own defense if he so chooses. As a result of these new findings he will again be presented to the staff for further determination of his competency to stand trial.

Emasue Snow M.D.
EMASUE SNOW, M.D.
Staff Psychiatrist

Dictated: 11/6/74
ES: sb
Typed: 11/8/74

M. C. F. P.

SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT "O"

Committed Name FINEROS, Alfonso

Reg. No. 21611-175

Date 10/25/74

PSYCHOLOGICAL TEST REPORT

This individual was seen for individual psychological tests. During the testing he was cooperative, friendly, and related appropriately to the examiner. Due to a language barrier the examiner had to have an interpreter present; however it was noted that Mr. Pineros frequently would respond to the examiner's questions when they were directed to the interpreter. It is my impression that Mr. Pineros understands more English than he tends to convey when being evaluated.

TESTS ADMINISTERED: Due to the language barrier present the following psychological tests were given:
Rorschach Ink Blot Test, Bender-Gestalt-Motor-Visual Test, House-Tree-Person Test, along with a clinical interview.

ORGANIC AND INTELLECTUAL FACTORS: Since we have no objective measure of his intellectual functioning the examiner's impression is based upon his responses to the Rorschach as well as information gathered from clinical interview. Based upon this information, it is my feeling that this individual has normal intellectual abilities. The Bender-Gestalt was drawn quite adequately which would rule out any sign of organic factors present. The Bender was also typically the kind found in a person with normal intellectual abilities.

PERSONALITY FACTORS: On the Rorschach Test we find there is no indication of thought disturbance present. There was no sign of psychosis nor were there any signs of organic factors operating. He was somewhat constricted, there is a great deal of anxiety present and the over-all picture would tend to indicate a person who has a fairly intact personality structure. The House-Tree-Person projective test is in keeping with the Rorschach findings, again indicating a somewhat constricted individual who has trouble relating to other individuals and who may be somewhat manipulative in nature.

SUMMARY: The psychological tests even though they were limited in nature along with the clinical interview would tend to indicate an individual with dyssocial behavior. There are no signs of organic or psychotic behavior present in this patient.

Dictated: 10/25/74
CIW: sb
Typed: 10/30/74

Clifford I. Whipple
CLIFFORD I. WHIPPLE, Ph.D.
Consulting Psychologist

DATE 7/27/74 Patient PINEROS A 261

Group Testing Behavior

	<u>poor</u>	<u>average</u>	<u>good</u>
1. Disruptive to other testees.	-----	-----	-----
2. Cooperative toward test administrator.	-----	-----	-----
3. Comprehension of instructions: written	-----	-----	-----
spoken	-----	-----	-----

couldn't speak, read, or write

English - H.T.P translated

by officer Wibel

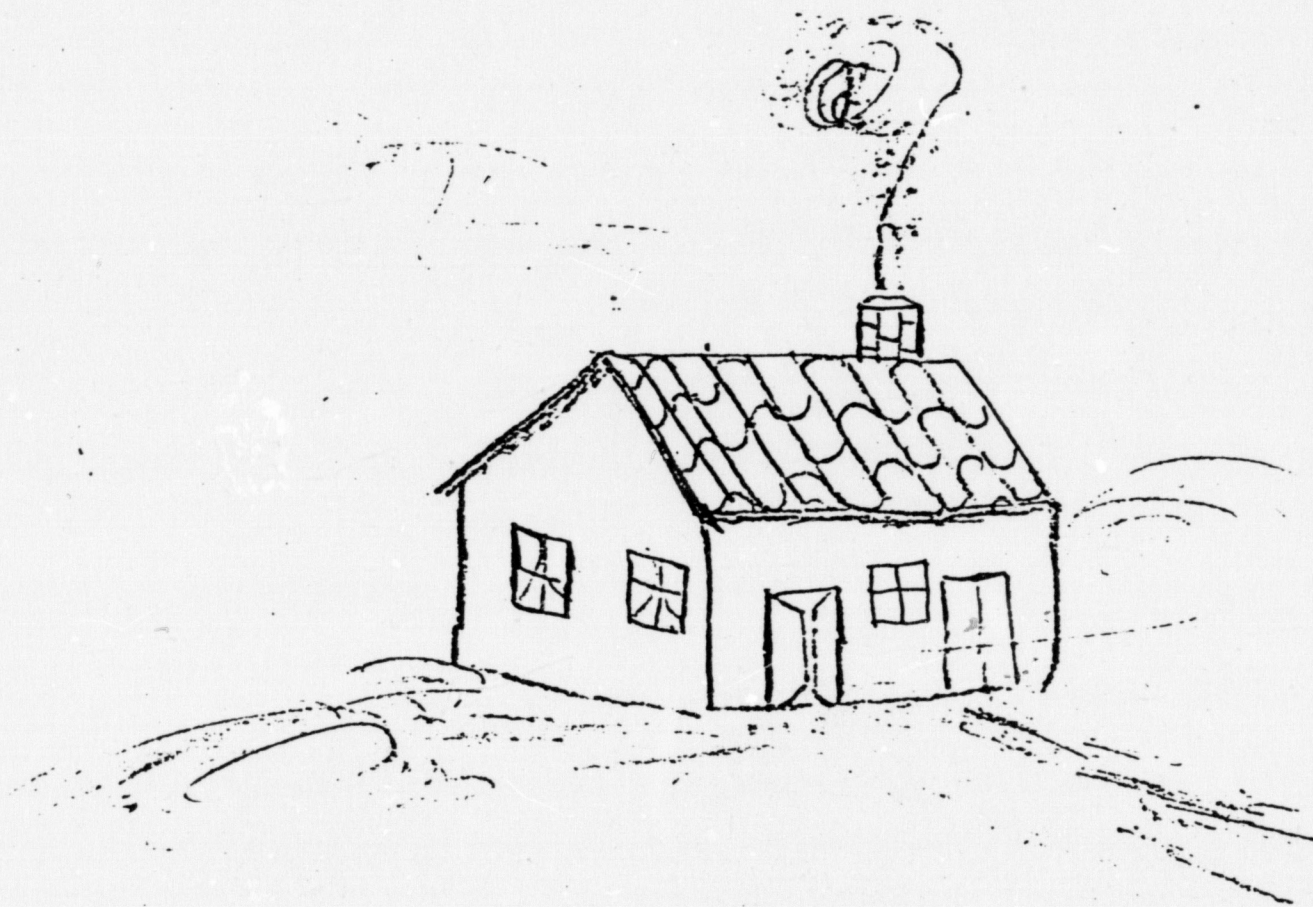
W. R. [Signature]
Lead Tester
Psychometrist

G. Alfonso Píneros ^A 202
216.11

7/22/74

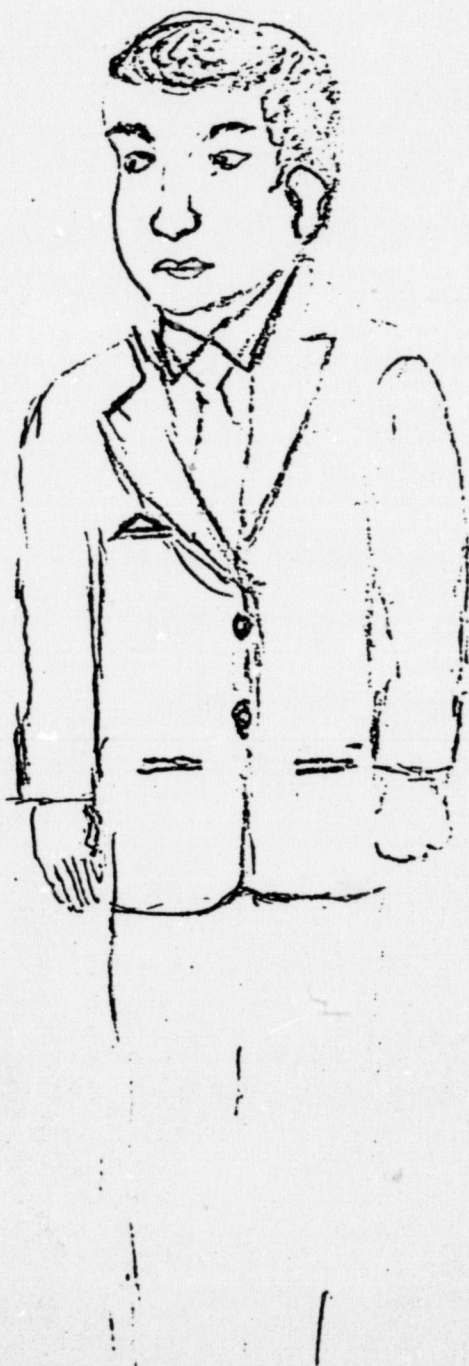
Yo soy Gilberto Alfonso Píneros de profesion, Evanista
Tengo un corazón generoso y buenas ideas
humanitaria he sido presidente de un Cen-
tro de Cultura y de portez, me siento Respon-
sable como padre de familia. trato al proximo
como me gusta ser tratado, no hago criticas
ni sensuro. me gusta estudiar las mentes
humanas, y buscarles sus motivos de sus
errores, he tenido sufrimientos, pero, comprendo
que sufrir es necesario para poder ser fuerte
en esta vida, me siento muy feliz de haber
recuperado mi salud mental mente, y doy
gracias a la ciguitria Rama de la medicina
por sentirme tan bien

Dibuja una casa



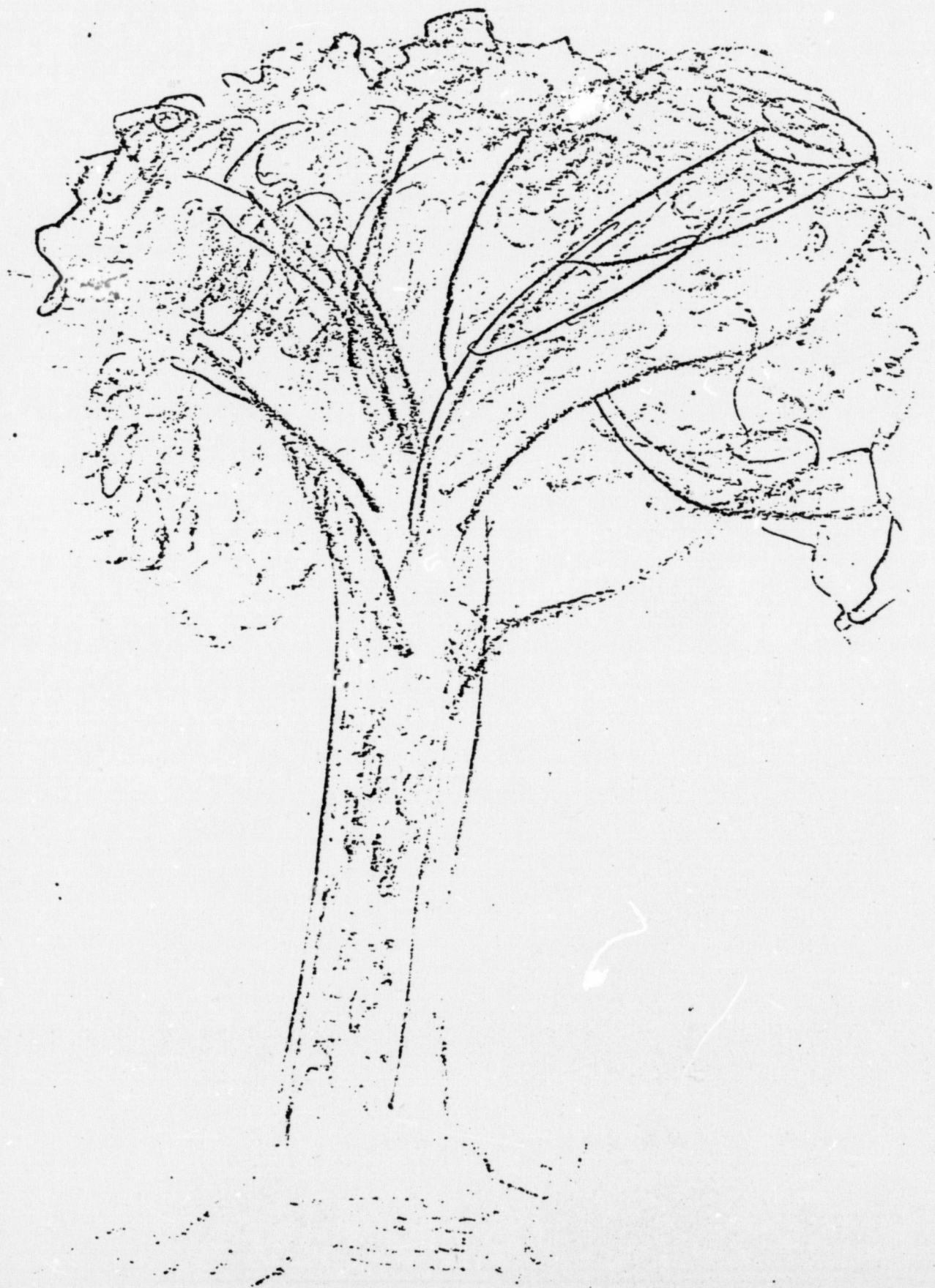
A 204

Una persona



A 205

arbol

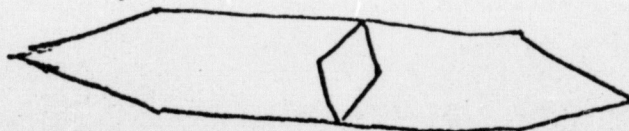
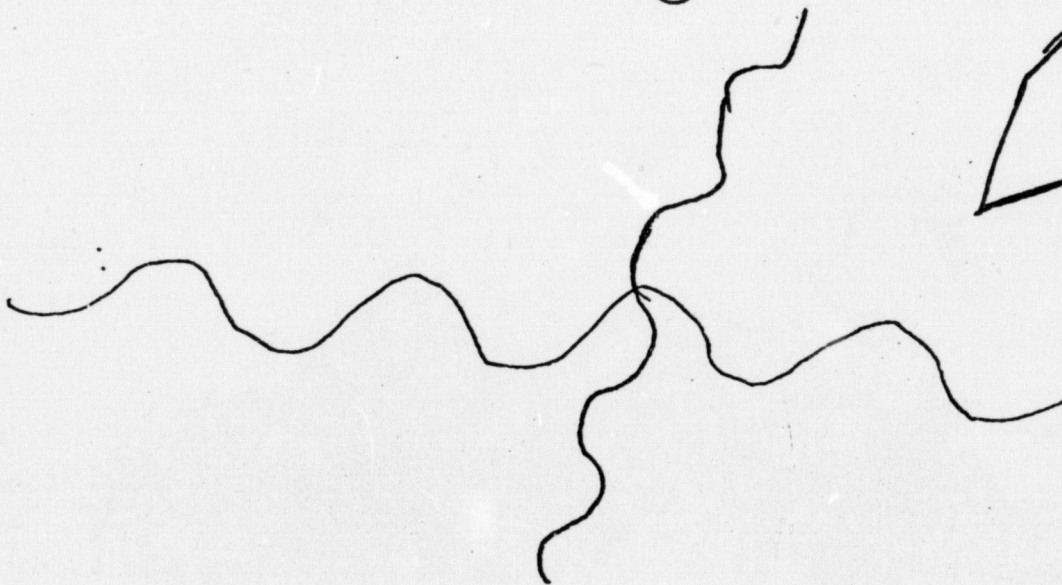
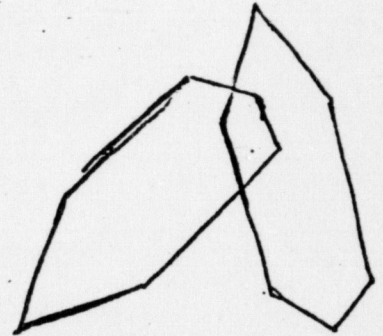
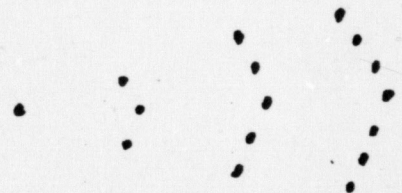
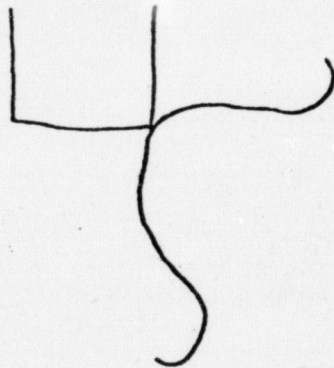
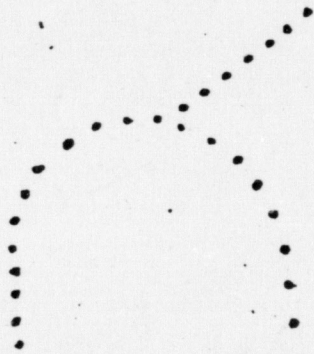
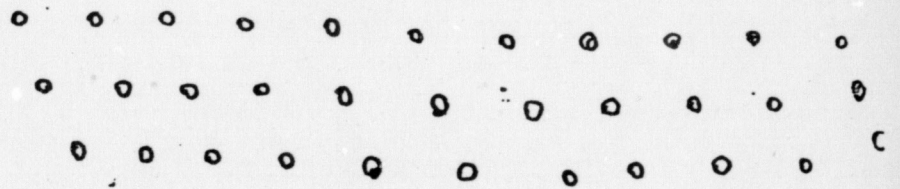
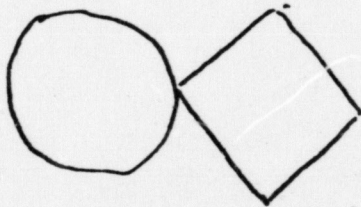


A 206

Alfonso Piñeroz

216.11

7-22-76



9/27/74

Rev. Pres. ? Cocaine

A 207

Piñeros, Alfonso

Went to Eugenia - Had Interpreter - Mr Mackin

Say he 2 mo.

Is very sick - does not know passage
of time - but thinks its two mo

Mamie, 4 children 14, 12, 6, 4

N.Y. - wife lives there

Bogota, Col. In ~~US~~ Oct 1973. he ~~arrives~~

Seen wife 2 mo. ago.

talked to her 6 weeks ago on phone

Education = 4 years - Elem. 7/8 & 9.

(yes he does read) but not a lot

Check to Jim Re: MMPI in Spanish.

Other Spanish inmates do NOT talk to him.

Lang. different - other says he is lousy

Pine 203

I. 12"

1. Birds - 2 together

- Not Psychotic -
- like a dream?

II 16"

1. Jiggled - Rabbits

Key is used!
understand much more
than he lets on -
says he's ^{like} a man
from over. hitting by word
into Jan when ^{he} comes
around!

III. 12"

1. hum - 2 people - holding on to pots
2. (D₃ what look like?) don't know

IV. 35"

1. ✓ a Bat. didn't like the way it looked
look repulsive -

V. 5"

1. Another Bat. seemed feature.
looked more ~~extra~~ than it

VI 30"

1. An animal which has been stepped
on & squashed - an Insect. Scorpion.

VII 6"

1. make some exposure -
Colored Bird - Bat.

2. (test limits) / woman genitals -

VIII 12"

1. Colored Bat - again

2. Spinal Column - middle

3. (test limits) 2. Bison on top of mountain

AFFIDAVIT OF MAILING

STATE OF NEW YORK
COUNTY OF KINGS
EASTERN DISTRICT OF NEW YORK, ss:

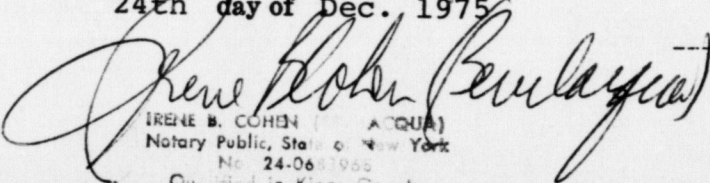
----- PAUL B. BERGMAN -----, being duly sworn, says that on the --24th--
day of --December, 1975--, I deposited in Mail Chute Drop for mailing in the
U.S. Courthouse, Cadman Plaza East, Borough of Brooklyn, County of Kings, City and
State of New York, a --GOVERNMENT'S APPENDIX-----
of which the annexed is a true copy, contained in a securely enclosed postpaid wrapper
directed to the person hereinafter named, at the place and address stated below:

----- Ira Leitel, Esq. -----

----- 188 Montague Street -----

----- Brooklyn, N.Y. 11201 -----

Sworn to before me this
24th day of Dec., 1975


IRENE B. COHEN (ACQUA)
Notary Public, State of New York
No. 24-0681966

Qualified in Kings County
Commission Expires March 30, 1977

PLEASE TAKE NOTICE that the within
presented for settlement and signa-
the Clerk of the United States Dis-
court in his office at the U. S. Court-
225 Cadman Plaza East, Brooklyn,
rk, on the ____ day of _____,
at 10:30 o'clock in the forenoon.

Brooklyn, New York,

_____, 19____

United States Attorney,
Attorney for _____

rney for _____

PLEASE TAKE NOTICE that the within
true copy of _____ duly entered
on the ____ day of _____
_____, in the office of the Clerk of
U. S. District Court for the Eastern Dis-
trict of New York,
1: Brooklyn, New York,

_____, 19____

United States Attorney,
Attorney for _____

torney for _____

----- Action -----

No.-----

UNITED STATES DISTRICT COURT
Eastern District of New York

-----Against-----

United States Attorney,
Attorney for _____
Office and P. O. Address,
U. S. Courthouse
225 Cadman Plaza East
Brooklyn, New York 11201

Due service of a copy of the within
_____ is hereby admitted.

Dated: _____, 19____

Attorney for _____

